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Missouri State Level Registry for Provider Incentive Payments

Missouri State Level Registry (MO-SLR) User Manual

Eligible Hospitals

Version 1.1

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Revision History

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1.0	11/16/2010	Draft document	Annie Washington Madhuri Pamidipati David Morton
1.1	5/16/2011	Editing and adding Missouri-specific content	Will Graeter

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1. Introduction

The overall goal of the User Manual is to help guide hospital administrators through the process of completing your state's application for provider incentive payments.

1.1 Who can benefit from the User Manual?

This manual is for administrators for eligible hospitals to use as a guide to the web application.

1.2 MO-SLR Application Availability

The application is on the Web and is available 24 hours a day, 7 days a week, and is accessible from the internet.

1.3 User Manual Goals

The **Missouri State Level Registry (MO-SLR) User Manual** will help walk you through the following steps:

- How to create your MO-SLR account
- How to access the MO-SLR application
- How to register for the Missouri Eligible hospital Provider Incentive Payment Program
- How to enter your eligibility information for the incentive payments
- How to enter your attestation for your certified EHR technology
- How to submit your final attestation
- How to make changes to your account
- Who to call when you need help

1.4 Problem Reporting

For general Help, all MO-SLR web pages have a **Help** Link that opens up a copy of this User Manual. For MO-SLR Web application assistance, you can contact the ACS Help Desk designated to support the MO-SLR.

Phone: (866) 879-0109
Email: SLRHelpdesk@acs-inc.com

2. Overview

As the healthcare landscape continues to modernize, recent legislation was passed to encourage the adoption of Electronic Healthcare Record (EHR) technology in documenting patient care. Because of the American Recovery and Reinvestment Act of 2009, beginning in 2011, eligible Medicaid providers are being offered financial incentives for the implementation and meaningful use of Health Information Technology (HIT) in the management of patient populations. In support of this initiative, ACS has developed the EHR Provider Incentive Portal (MO-SLR) application.

By using the MO-SLR application, you have access to a streamlined application for federally funded HIT incentives through an easy to use website. With self-service flexibility, you can move through registration, eligibility and attestation at your own pace while the MO-SLR application stores your information in an organized manner. The result is providing you with the most direct to your incentive payment.

2.1 Application Features

The MO-SLR application features the following functions that are explained further in this User Manual:

- Create your MO-SLR user account
- Login – Accessing the MO-SLR
  - Retrieve Your User ID
  - Retrieve Your Password
  - Reset Your Password
- Applying for the incentive as an Eligible Hospital (EH):
  - Step 1: About You (Registration)
  - Step 2: Confirm Medicaid Eligibility
  - Step 3: Attestation of EHR
  - Step 4: Review and Signing of the Attestation
  - Step 5: Submission of the Attestation
- View Messages
- View Reports
- View Payment Status/Payment Calculations

2.2 Application Architecture

The MO-SLR Web application features the following:

- Compliance with Section 508 accessibility guidelines.
- Accessibility from the internet: ACS has made every effort to make this site accessible to people with disabilities. In the event you experience difficulty accessing this site with assistive devices, please contact our Help Desk at (866) 879-0109 for assistance in obtaining the information you need. State of Missouri accessibility standards are available for review.
- Secure protected page access.

2.3 Materials and Preparations

Materials the user will need to use the software:

- Computers with access to the web browser.
- Software – **Adobe Acrobat Reader –** installed on your machine to view PDF files.
- The Pop-up Blocker feature of your browser should be set to **Off** to enable pop-up window features.
- Manuals and/or FAQ's that are available for distribution.

Also note that this application is approved for use with Microsoft Internet Explorer versions 7.0 and 8.0.

3. Method

3.1 Login – Accessing the MO-SLR

The MO-SLR is a web based application. It is accessible from the internet via the Provider Outreach Web portal or directly from a login URL.

Go to your internet explorer to access the Web.

Type your State's URL in the address field and press the **Enter** key on your keyboard.

https://mo.arraincentive.com

MO-SLR login from the Provider Outreach Web portal

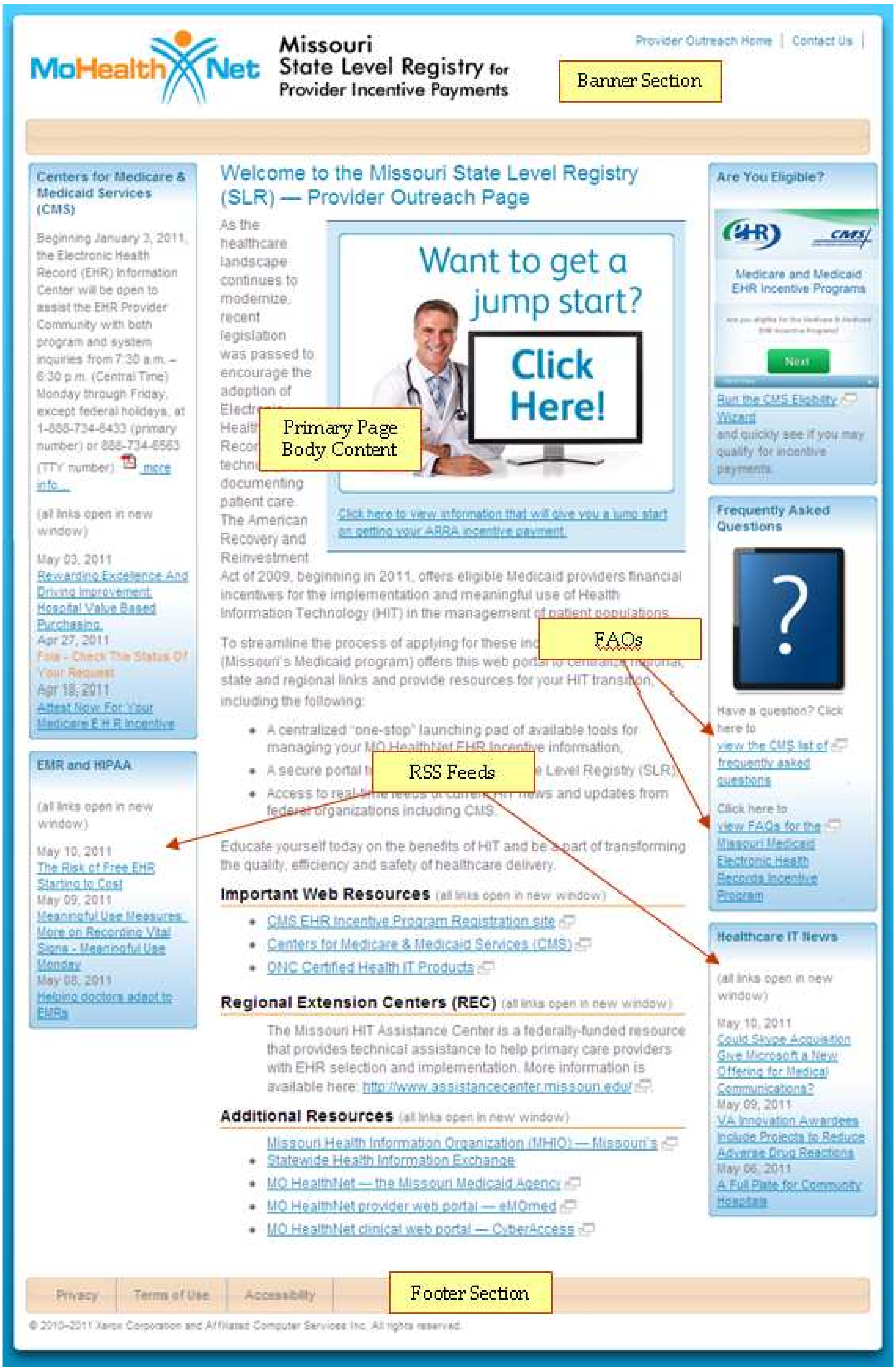
You can login to the MO-SLR Web application from the Provider Outreach Web portal. This webpage features Provider education resources as it relates to the ARRA and HITECH acts and also provides a link to the MO-SLR application login page.

The *Provider Outreach* page displays the following:

1. Located at the top of the page is a banner that displays the following items that are visible on every page of the MO-SLR application:
    a. Missouri's Mo HealthNet logo.
    b. The heading "Missouri State Level Registry for Provider Incentive Payments". This is the name of the application.
    c. **Provider Outreach Home** link: on other pages in the Provider Outreach site, this links to the home page.
    d. **Contact Us** link: opens a pop-up page displaying contact information including the ACS Help Desk phone number and email.
2. MO-SLR Account Creation/Entry, FAQs and RSS Feeds sections. Located to the left and right of the page, these columns display the following sections:
    a. *Centers for Medicare & Medicaid Services (CMS)* section: links in this section open up a new window and displays CMS news.
    b. *EMR and HIPPA* section: Links in this section open up a new window and display news related to Electronic Medical Records (EMR) and the Health Insurance Portability and Accountability Act (HIPPA).
    c. *Are You Eligible?* section: clicking this link or graphic opens the CMS Eligibility Wizard, which asks a series of questions to see if a Provider would likely be eligible for an incentive payment.
    d. *Frequently Asked Questions* section: the view our list of most frequently asked questions link directs you to CMS' frequently asked questions website related to electronic health record (EHR) technologies and the incentive program.
    e. *Healthcare IT News* section: a link in this section opens up a new window and displays an article related to Healthcare IT news.
    f. *Need to create an MO-SLR account?* section: leave this site and create an MO-SLR account. The link directs you to the *Create Account* page.

   g. *Already have an MO-SLR account?* section: directs you to the *Login* page.

3. Located in the middle of the page, the primary page content entails the following sections:
   a. Welcome text. This is an overview of the Provider Outreach Web portal.
   b. *Important Web Resources* section. A link in this section opens up a new window and displays the appropriate website. Standard links provided by ACS include links to CMS, the NLR and the ONC.
      i. **CMS EHR Incentive Programs Registration site** link: opens up a new window and displays the Medicare & Medicaid EHR Incentive Program Registration and Attestation System.
      ii. **Centers for Medicaid and Medicaid Services** link: opens the CMS site.
      iii. **ONC Certified Health IT Products** link: opens up a new window and displays the Certified Health IT Product List.
   c. *Regional Extension Centers (REC)* section. Clicking the link in this section opens up a new window and displays the REC website.
   d. *Additional Resources* section. Clicking a link in this section opens up a new window and displays the associated website. These include:
      i. Missouri Health Information Organization (MHIO) — Missouri's Statewide Health Information Exchange
      ii. MO HealthNet — the Missouri Medicaid Agency
      iii. MO HealthNet Provider web portal — eMOmed
      iv. MO HealthNet clinical web portal — CyberAccess
4. Footer section. Located at the bottom of the page, the footer displays the following items:
   a. **Privacy** link: opens a new window with a Privacy policy displayed.
   b. **Terms of Use** link: opens a new window with the Terms of Use policy displayed.
   c. **Accessibility** link: opens a new window with the website's Accessibility policy displayed.
   d. **ACS/Xerox Copyright.** This is ACS's copywrite symbol and text.


MoHealthNet
Missouri
State Level Registry for
Provider Incentive Payments
Provider Outreach Home | Contact Us |
Banner Section
Centers for Medicare & Medicaid Services (CMS)
Beginning January 3, 2011, the Electronic Health Record (EHR) Information Center will be open to assist the EHR Provider Community with both program and system inquiries from 7:30 a.m. – 6:30 p.m. (Central Time) Monday through Friday, except federal holidays, at 1-888-734-6433 (primary number) or 888-734-6563 (TTY number). more info...
(all links open in new window)
May 03, 2011
Rewarding Excellence And Driving Improvement: Hospital Value Based Purchasing.
Apr 27, 2011
Foia - Check The Status Of Your Request
Apr 18, 2011
Attest Now For Your Medicare E H R Incentive
EMR and HIPAA
(all links open in new window)
May 10, 2011
The Risk of Free EHR Starting to Cost
May 09, 2011
Meaningful Use Measures. More on Recording Vital Signs - Meaningful Use Monday
May 08, 2011
Helping doctors adapt to EMRs
Welcome to the Missouri State Level Registry (SLR) — Provider Outreach Page
Want to get a jump start?
Click Here!
Primary Page Body Content
Click here to view information that will give you a jump start on getting your ARRA incentive payment
As the healthcare landscape continues to modernize, recent legislation was passed to encourage the adoption of Electronic Health Record technology for documenting patient care. The American Recovery and Reinvestment Act of 2009, beginning in 2011, offers eligible Medicaid providers financial incentives for the implementation and meaningful use of Health Information Technology (HIT) in the management of patient populations.
To streamline the process of applying for these inc... (Missouri's Medicaid program) offers this web portal to centralize regional, state and regional links and provide resources for your HIT transition, including the following:
FAQs
A centralized "one-stop" launching pad of available tools for managing your MO HealthNet EHR Incentive information.
A secure portal t... Level Registry (SLR).
RSS Feeds
Access to real-time feeds of current HIT news and updates from federal organizations including CMS.
Educate yourself today on the benefits of HIT and be a part of transforming the quality, efficiency and safety of healthcare delivery.
Important Web Resources (all links open in new window)
CMS EHR Incentive Program Registration site
Centers for Medicare & Medicaid Services (CMS)
ONC Certified Health IT Products
Regional Extension Centers (REC) (all links open in new window)
The Missouri HIT Assistance Center is a federally-funded resource that provides technical assistance to help primary care providers with EHR selection and implementation. More information is available here: http://www.assistancecenter.missouri.edu/
Additional Resources (all links open in new window)
Missouri Health Information Organization (MHIO) — Missouri's Statewide Health Information Exchange
MO HealthNet — the Missouri Medicaid Agency
MO HealthNet provider web portal — eMOmed
MO HealthNet clinical web portal — CyberAccess
Are You Eligible?
Medicare and Medicaid EHR Incentive Programs
Next
Run the CMS Eligibility Wizard and quickly see if you may qualify for incentive payments.
Frequently Asked Questions
Have a question? Click here to view the CMS list of frequently asked questions
Click here to view FAQs for the Missouri Medicaid Electronic Health Records Incentive Program
Healthcare IT News
(all links open in new window)
May 10, 2011
Could Skype Acquisition Give Microsoft a New Offering for Medical Communications?
May 09, 2011
VA Innovation Awardees Include Projects to Reduce Adverse Drug Reactions
May 06, 2011
A Full Plate for Community Hospitals
Privacy
Terms of Use
Accessibility
Footer Section
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To get to the login page from the *Provider Outreach* page, click on the **go directly to the State Level Registry** link located on the left side of the *Provider Outreach* webpage.

MO-SLR login directly from the MO-SLR login URL

If you have already created an account, you can also get to the SLR's *Login* page by entering the URL into your browser:

https://mo.arraincentive.com/

Type the Missouri State Level Registry URL in the address field and press the **Enter** key on your keyboard.

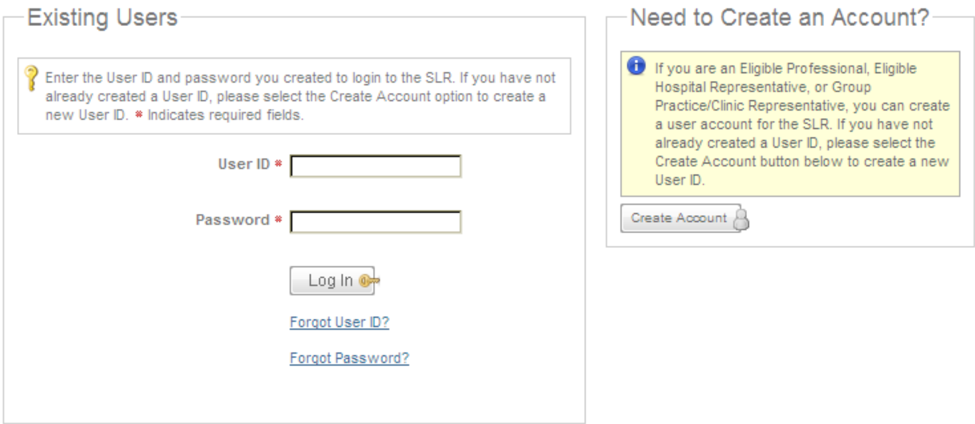
From here, you will reach the MO-SLR Web application *Login* page. You'll have three chances to enter in the correct login information before the system locks your account. If that happens, you can call the Help Desk for assistance.

Throughout the MO-SLR application, red asterisks (*) display on various fields. This symbol indicates that this field is required to be completed in order to continue through the application.

The Login page displays the following:

1. **User ID** field: enter your User ID.
2. **Password** field: enter your password.
3. **Login** button: verifies the User ID and password you entered and opens the End User License Agreement (EULA).
4. **Forgot User ID?** link: select when you have forgotten your User ID. The system will ask you for your NPI and TIN as well as the answer to the Challenge Question you selected when creating your account. Once you have entered those correctly, the system will email your User ID to the email address you entered when you created your account.
5. **Forgot Password?** link: select when you have forgotten your password. The system will ask you for your User ID as well as the answer to the Challenge Question you picked when creating your account. Once you have entered those correctly, the system will email you a link to reset your password to the email address you entered when you created your account.

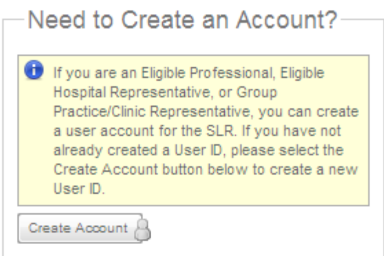
6. **Create Account** button: select this if you need to create a new MO-SLR account.



3.2 Creating a New MO-SLR Account for Eligible Professionals

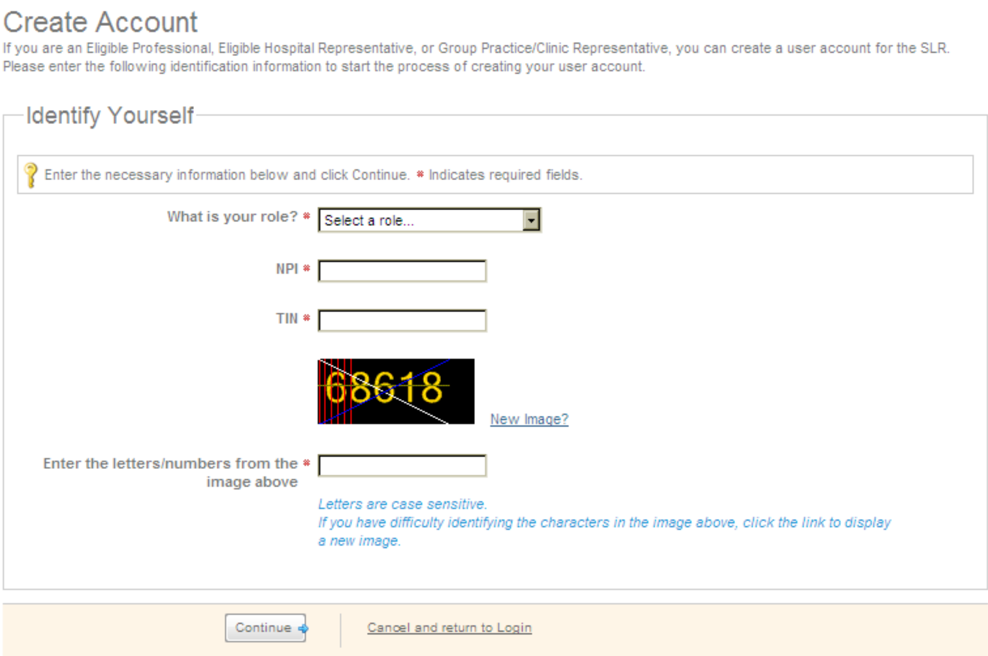
To create a new account from the *Provider Outreach* page, select the "leave this site and create an MO-SLR account" located on the left side of the *Provider Outreach Jumpstart* page.

To create a new account from the *Login* page, select the **Create Account** button.



The *Create Account* page displays the following:

1. **What is your role?** pull-down menu: identify your Provider Type by selecting an option from the menu. As a hospital administrator, select Individual Eligible Hospital.
2. **NPI** text field: enter your National Provider Identifier (NPI) number. If you have more then one NPI, use the one that you used while registering with the National Level Registry. If the number entered is not recognized, an error message will appear, and you will not be able to proceed.
3. **TIN** text field: enter your Taxpayer Identification Number (TIN), which is either your Employer Identification Number (EIN) or your Social Security Number (SSN).
4. **CAPTCHA** image: This is a computer-generated image.
5. **New Image?** link: refreshes the image above if you are unsure of what numbers and letters are being displayed.
6. **Enter the letters/numbers from the image above** text field: enter the letters and/or numbers you see in the **CAPTCHA** image above. This is a security feature.
7. **Continue** button: select this button to the open the SLR. You will confirm your name and the address associated with your NPI and TIN.
8. **Cancel and return to Login** link: opens the *Login* page.

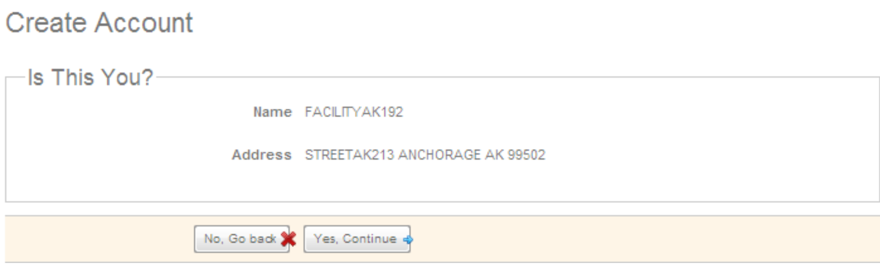


Clicking the **Continue** button opens the next page where you confirm that the information the system has pulled up is you.

The *Create Account Confirmation* page displays the following:

1. **Name** display field: the name associated with the NPI and TIN you entered.
2. **Address** display field: the address associated with the NPI and TIN you entered.
3. **Additional fields:** any additional fields associated with the NPI and TIN you entered will display here.

4. **No, Go back** button: returns to the previous page.
5. **Yes, Continue** button: opens the next page to continue creating your account.

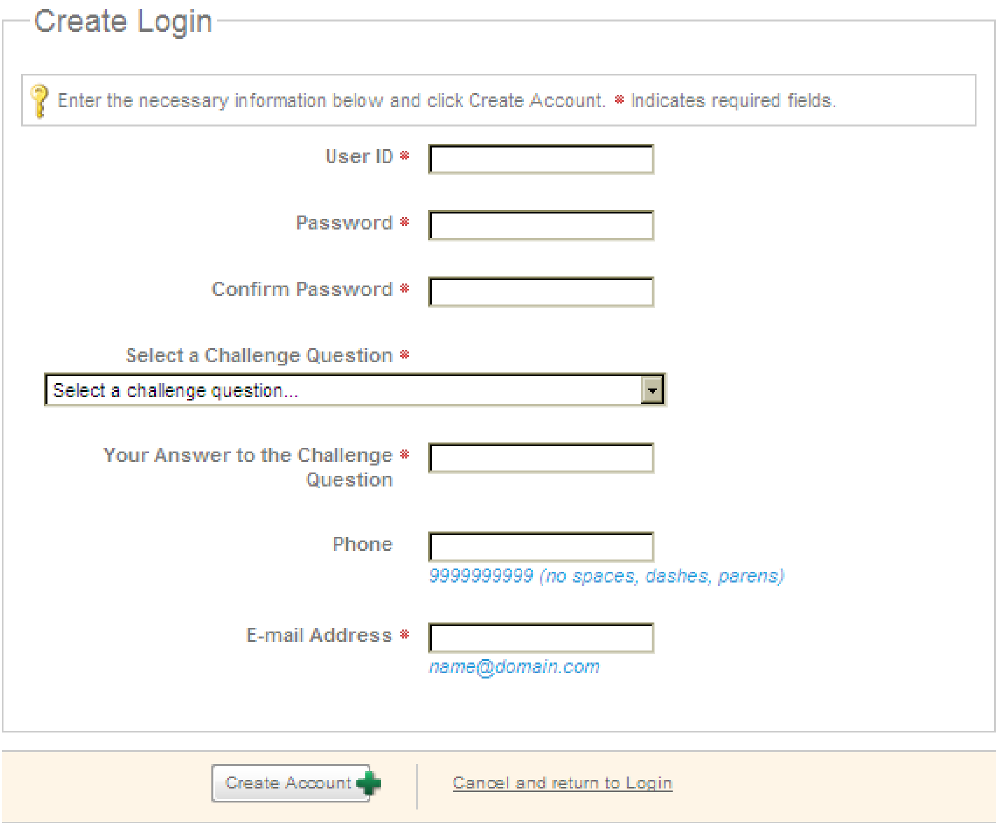


If the information is not correct, select the **No, Go back** button. You will return to the previous page. From there, you can either retry entering your NPI and TIN or call the Help Desk for assistance.

If the information is correct and you click the **Yes, Continue** button, the following additional section will appear on the page:

1. **User ID** text field: enter a User ID Number. This must be at least 8 letters and/or numbers long, but not more than 20 letters and numbers.
2. **Password** text field: enter a password. Your password also needs to be at least 8 letters and numbers long and must be less than 20 letters/numbers. When you are choosing a password, you also need to make sure to include the following:
   - At least one capital letter
   - At least one lower case letter
   - At least one number
   - At least one of the following special characters: @ or # or !

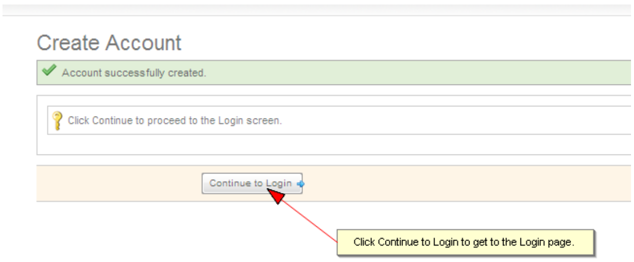
   Your password cannot be your User ID or your User ID spelled backwards.
3. **Confirm Password** text field: enter the password you entered above to confirm it.
4. **Select a Challenge Question** pull-down menu: select an option from the pull-down menu as a Challenge Question to answer.
5. **Your answer to the Question** text field: enter an answer for the Challenge Question that you selected above. You'll need this information if ever forget your User ID or password.
6. **Phone Number** text field: enter your phone number as a ten-digit number, with no spaces, dashes, or parentheses.
7. **Email Address** text field: enter your email address.
8. **Create Account** button: select this button to save your account. If you have left a required field blank or entered information incorrectly, you will receive an error message.
9. **Cancel and return to Login** link: select this button to cancel all the changes and return to the *Login* page.



Once you click the **Create Account** button, you will be routed to the final page for creating an account.

The final *Create Account* page displays the following:

1. **Account successfully created.** This is a message signifies that you have successfully created your MO-SLR account.
2. **Continue to Login** button: opens the *Login* page.

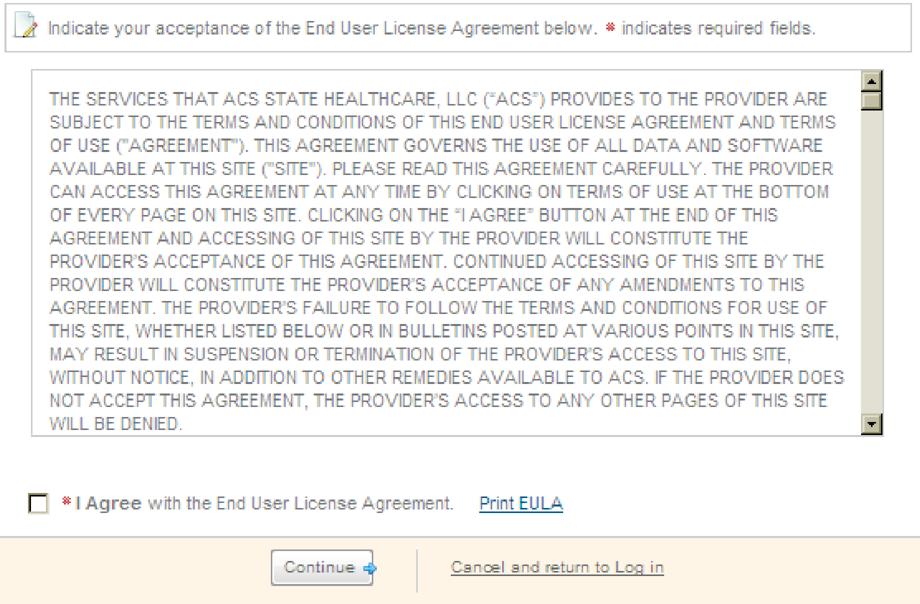


3.3 Accepting the End User License Agreement (EULA)

After your first login to the system, you will be presented with the End User License Agreement (EULA). You must agree with the EULA in order to continue.

The *End User License Agreement* page displays the following:

1. **I Agree with the End User License Agreement** checkbox: selecting this checkbox indicates that you agree with the associated statement.
2. **Continue** button: opens the SLR home page.
3. **Cancel and return to Log in** link: returns you to the *Login* page.



3.4 Changing Your Password

Your password will be good for 45 days. When you login and 45 days have passed since you created the password, a *Reset Password* page will appear. You can change your password on this page.

2. After 45 days, the *Reset Password* page displays:
   a. **New Password** text field: enter a new password.
   b. **Confirm New Password** text field: enter the password again.
   c. **Save** button: selecting this button saves your new password.
   d. **Cancel** button: clears entries made into the two text fields above, and no change is made to your password.
3. Voluntary Password Change:

   To change your password before the 45 days have passed, select the **My Account** link in the top right-hand corner of the MO-SLR home page. In addition to changing your password, you can also update contact information or change your Challenge Question and answer on this page.

   The *My Account* page displays the following:

   a. **User ID** text field: displays your current User ID and allows you to change it.
   b. **Password** text field: displays your current password and allows you to change it.
   c. **Confirm Password** text field: if you are changing your password, confirm the password in this field.

d. **Select a Challenge Question** pull-down menu: select a new Challenge Question.

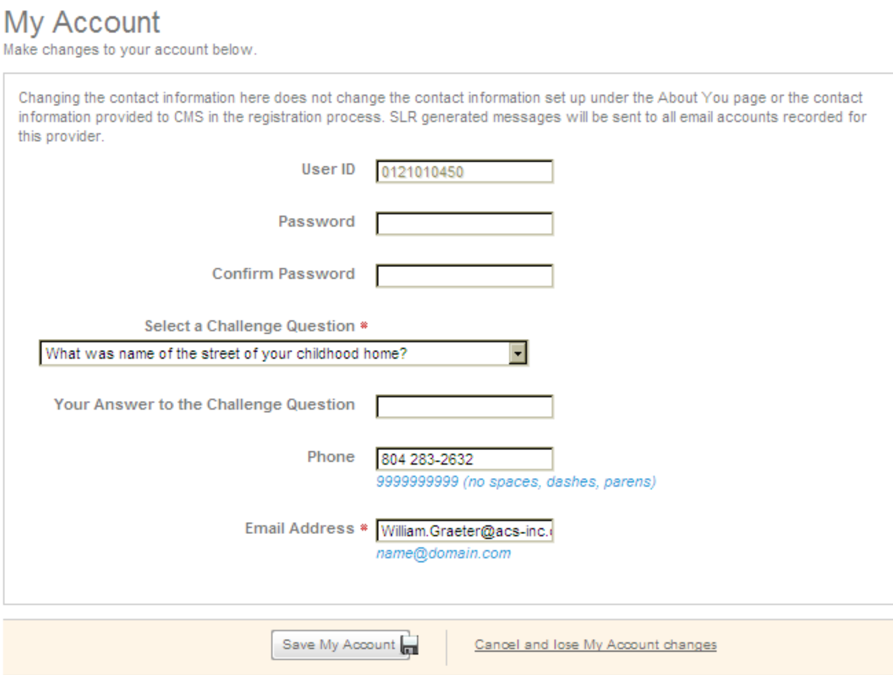
e. **Your Answer to the Challenge Question** text field: if you select a new Challenge Question, enter a new answer to the Question.

f. **Phone** text field: displays your current phone number and allows you to change it.

g. **Email Address** text field: displays your current email address and allows you to change it.

h. **Save My Account** button: saves any updated information you entered on this page.

i. **Cancel and lose My Account changes** link: clears the information you have entered.



3.5 Applying for the incentive as an Eligible Hospital (EH)

After you log in as an Eligible Hospital (EH) user and accept the EULA, the EH home page will open. The home page serves as a dashboard and navigation tool for the MO-SLR application.

3.5.1 Home Page

The MO-SLR home page for EH displays the following:

1. MO-SLR Banner section. Located at the top of the page, the banner displays the following items that are visible on every page of the MO-SLR application:

   a. Missouri's MoHealthNet logo.

   b. **Missouri State Level Registry:** the name of the application.

   c. **My Account** link: opens the *My Account* page.

d. **Help** link: displays a PDF copy of this User Manual.

e. **Contact Us** link: a pop-up page displaying contact information, including the ACS Help Desk phone number and email address.

f. **Logout** link: allows you to log out of the MO-SLR Web application.

a. **Filing as Eligible Hospital** message: designates your Provider Type.

g. Hospital Name display field: the name of your Hospital.

h. Hospital Street Address display field: your Hospital's street address.

i. Hospital City, State and Zip Code display fields: the City, State and Zip Code of your Hospital.

j. **Last Updated:** display field: displays the last person who updated your account and the date it was updated.

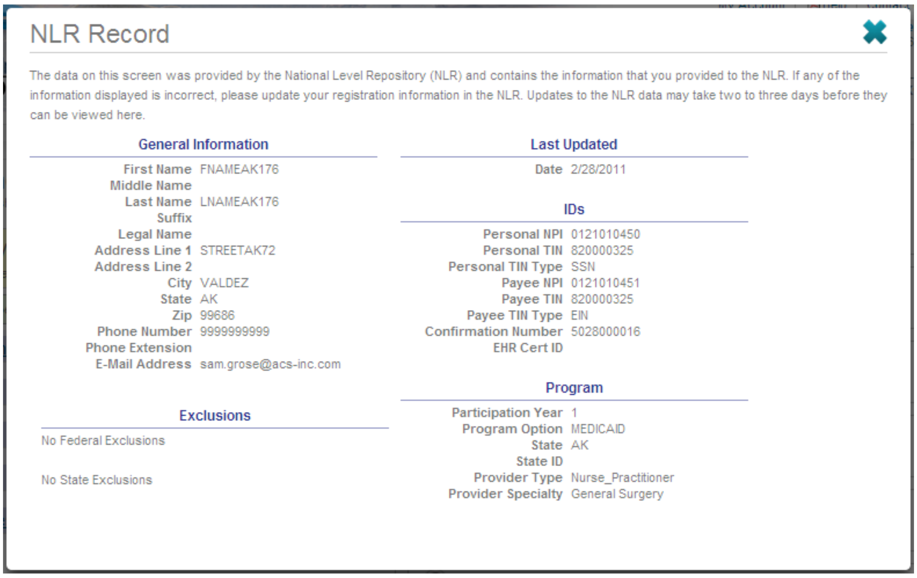
2. *Next Steps* section. Located to the left of the page, the Next Steps section displays messages an:

   a. **Begin/Continue your Year X submission today!** message: displays the year of attestation you are currently completing.

   b. **Section link:** communicates which page you left off when you last logged out.

   c. NLR Message display field: this will display "Data has/has not been received from the NLR", which indicates whether the MO-SLR application has received data from the NLR.

      i. **View NLR data** link: opens a pop-up window that displays your NLR record.



3. *Messages* section. Located to the left side of the home page, the *Messages* section displays the following items:

   a. *System* section: provides access to System messages.

i. # display field: indicates the number of unread messages that you have.

b. *Audit* section: provides access to Audit messages.

i. # display field: indicates the number of unread messages that you have.

c. *Appeals* section: provides access to Appeals messages.

i. # display field: indicates the number of unread messages that you have.

d. Individual messages. Clicking on one of the individual message links will open up a pop-up window with the entire message displayed.

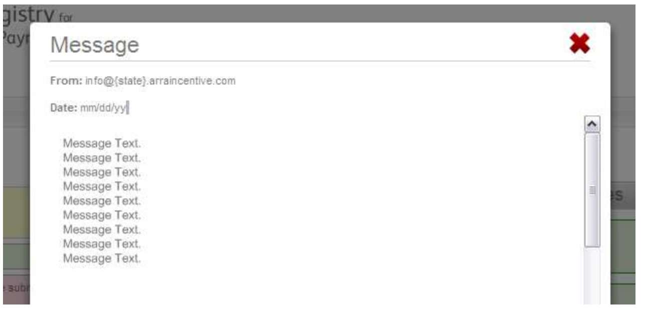
i. The first line indicates the window title.

ii. Close ✖ icon: Clicking this X will close this window and return you to the previous page.

iii. **From** display field: the sender the message.

iv. **Date** display field: the date the message was sent.

v. Message Text section: the message text.



4. *Reports* section: Located to the left of the home page, the *Reports* section displays the following items:

   a. **Reports** message: you will see the following message when you don't have any data in the system to run a report on: "Reports will be available once your information is saved."

   b. Report Titles: the titles of available reports will appear here. For example, the *Provider MO-SLR Application Information* report will appear after you have saved at least some information in the MO-SLR Web application. Clicking this link opens a pop-up window displaying the report.

5. *Payment Status* section: located on the left of the home page, the *Payment Status* section displays the following items that are visible on the home page:

   a. **How your payment is calculated** message: opens a pop-up window that explains how your payment is going to be calculated.

   b. **Payment Status** message: allows you to check on the status of your payment once your attestation has been submitted.

6. *Workflow* section (Detailed further below): located to the right of the page, the *Workflow* section displays the following items that are visible on the home page:

a. **Year [x]** tabs: each tab represents a year in which you have completed an attestation. The most current year's tab will always be the one visible when you log in. Click other tabs to view previous year information.

b. Sections: each section has a Status icon (, , ,) that indicates whether the each page has been started, whether the page has been completed, or whether it is still locked. A locked page cannot be accessed until the previous page has been completed. Each section will also have a description. The title of each section provides a link to that section.

   i. **About You**.

   ii. **Confirm Medicaid Eligibility**.

   iii. **Attestation of EHR**. This link will not be active until you've already completed your registration and eligibility.

   iv. **Review and Sign Attestation**. This link will not be active until you've completed your attestation of EHR.

   v. **Send Year X Attestation**. This link will not be active until you've reviewed, signed and uploaded your signed attestation agreement. Once you hit submit, all of the other sections will be locked for editing and will display your information as view-only.

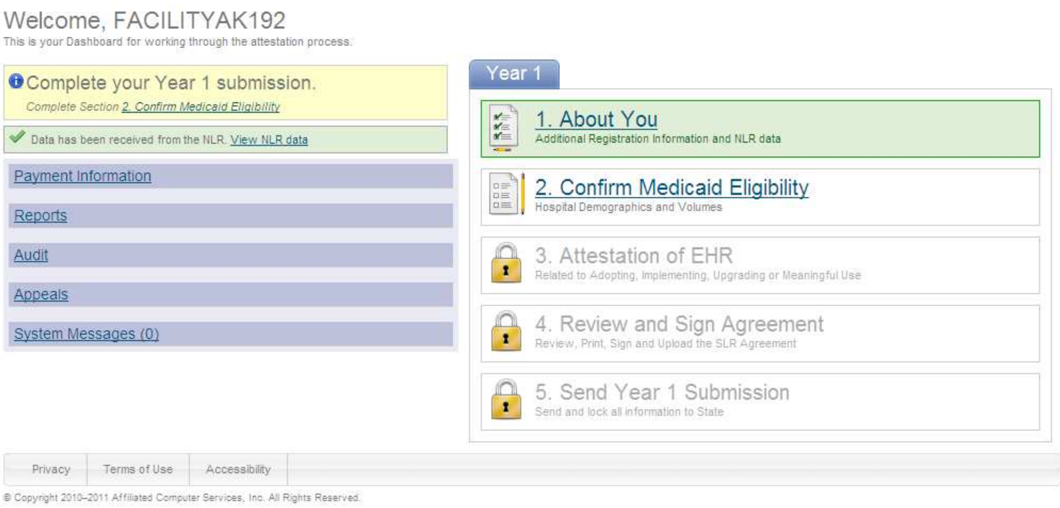
7. Footer section - Located at the bottom of the page, the footer displays the following items:

   a. **Privacy** link: clicking this link opens a new window with a Privacy policy displayed.

   b. **Legal** link: clicking this link opens a new window with a Legal Statement displayed.

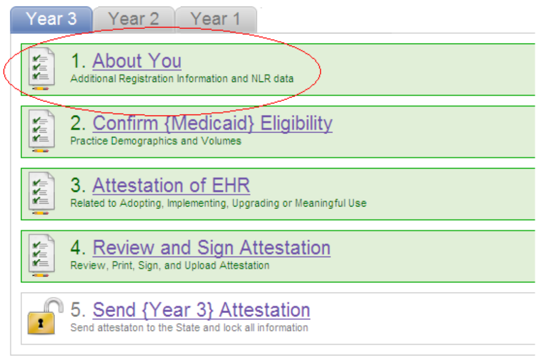
   c. **Accessibility** link: clicking this link opens a new window with the website's Accessibility policy displayed.

   a. **ACS/Xerox Copyright.** This is ACS's copy write symbol and text.



3.5.2 Workflow Section Details

This section describes in more detail the specific steps to take when applying for the Provider incentive. This begins with Step 1, the *About You* section, where you will enter your registration and contact information.



3.5.3 Step 1: About You Section

Clicking the **About You** link on the EH home page directs you to the *1. About You* page, allowing you to enter your registration information.

The *About You* page displays the following:

1. **< Back to Dashboard** Link: returns you to the home page.
2. *CMS National Level Repository (NLR) Data* section

   Please note that it can take up to three days for the MO-SLR to receive your data from the NLR.

   a. "Data has not been received from the NLR." message: This message appears if your NLR data has not been received by the MO-SLR.

   b. "Data has been received from the NLR." message: This message appears if the MO-SLR has received your NLR data.

   c. **Visit NLR website** link: opens the NLR website. The link is visible whether or not your NLR data has been received.

   d. **View NLR data** link: this link is visible if your NLR data has been received. Clicking the link opens a pop-up window that displays the NLR data. If you need to make a change to your NLR data, you must make updates in the NLR. You cannot make changes to your NLR data through the MO-SLR application. You cannot make changes to your NLR data through the MO-SLR application, and it takes between two and three days for changes at the NLR level to be applied to the MO-SLR.

3. *Contact Person* section. This section allows you to enter an additional contact besides the Eligible Professional.

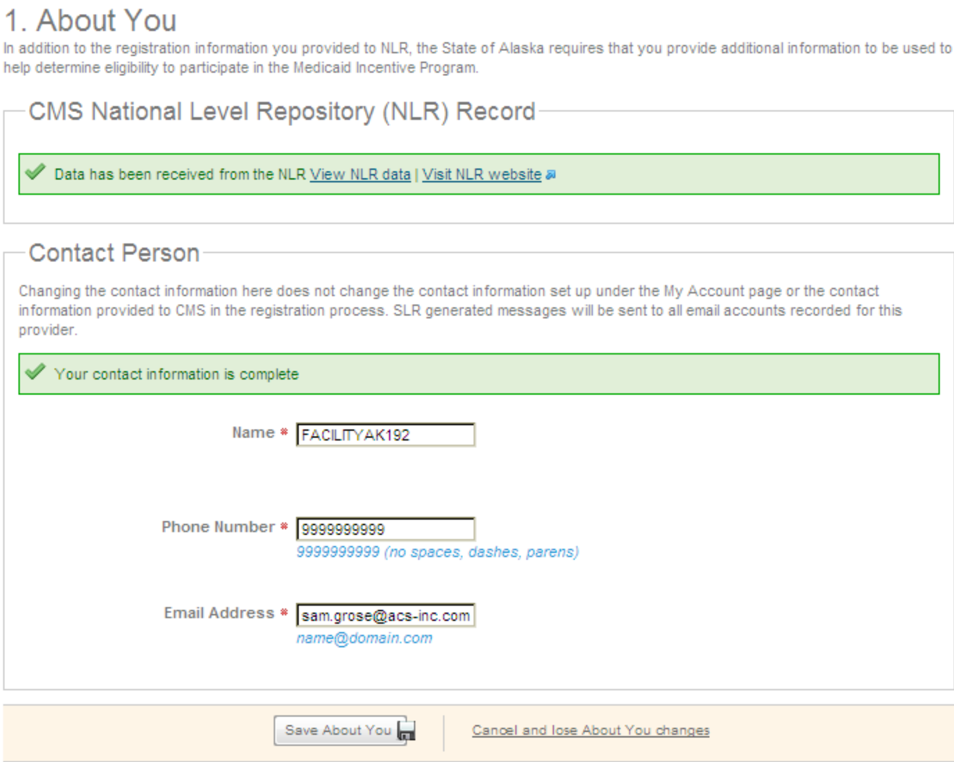
   i. **Name** text field: enter the name of the contact.

      1. **Phone Number** text field: enter the phone number as ten digits, with no spaces, dashes, or parentheses.

i. **Email Address** text field: enter the contact's email address. Initially it defaults to address that you entered while creating User Account.

e. **Save About You** button: saves the information you entered. If you have left a required field blank or entered information incorrectly, an error message will appear. Once all required fields are completed, this section will be marked as complete.

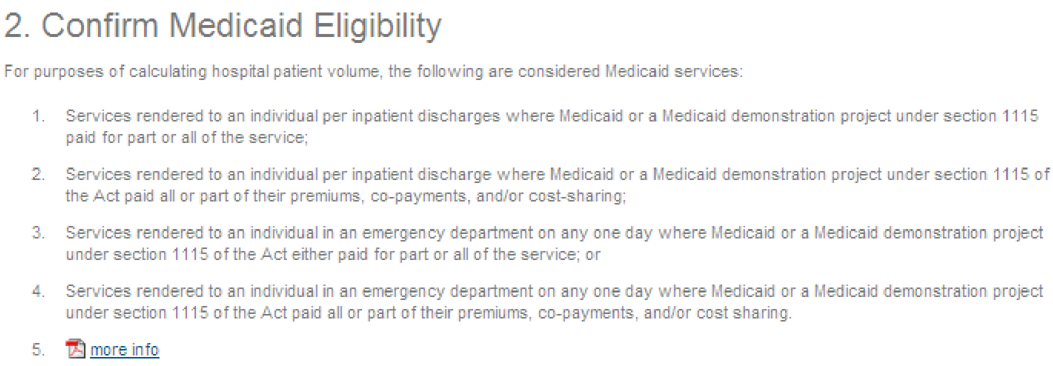
f. **Cancel and lose About You changes** link: clears the page of any information you have just entered.



After completing this information, you can proceed to completing your eligibility information by returning to the dashboard and selecting the next step. The status icon on your home page will change to indicate that your registration section is complete.

3.5.4 Step 2: Confirm Medicaid Eligibility Details

Clicking the **Confirm Medicaid Eligibility** link on the EH home page opens the *Confirm Medicaid Eligibility* page, which allows you to enter specific Hospital's eligibility information.



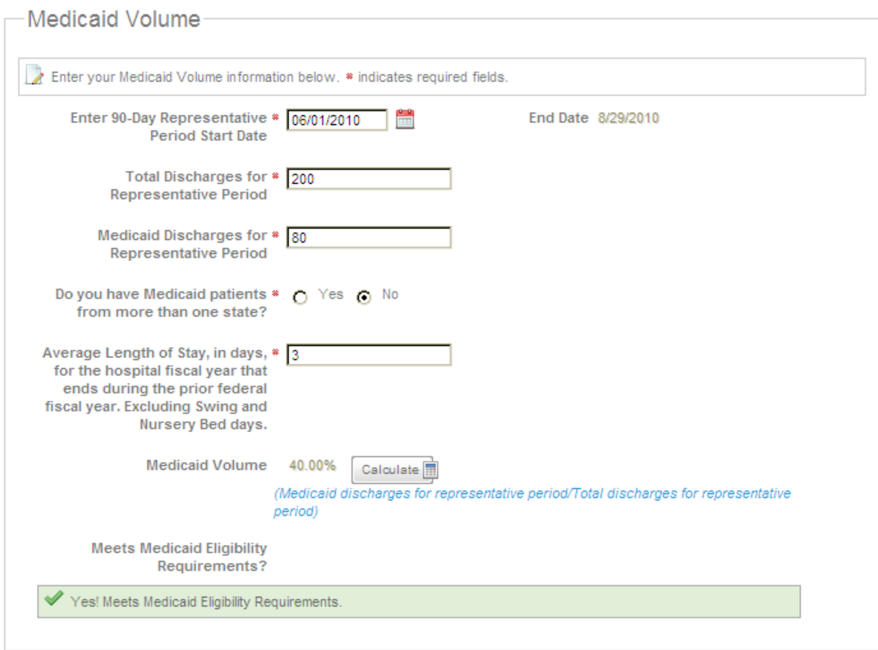
2. Confirm Medicaid Eligibility

For purposes of calculating hospital patient volume, the following are considered Medicaid services:

1. Services rendered to an individual per inpatient discharges where Medicaid or a Medicaid demonstration project under section 1115 paid for part or all of the service;
2. Services rendered to an individual per inpatient discharge where Medicaid or a Medicaid demonstration project under section 1115 of the Act paid all or part of their premiums, co-payments, and/or cost-sharing;
3. Services rendered to an individual in an emergency department on any one day where Medicaid or a Medicaid demonstration project under section 1115 of the Act either paid for part or all of the service; or
4. Services rendered to an individual in an emergency department on any one day where Medicaid or a Medicaid demonstration project under section 1115 of the Act paid all or part of their premiums, co-payments, and/or cost sharing.
5. more info

The *Confirm Medicaid Eligibility* page displays the following:

1. **< Back to Dashboard** link: clicking this link will return you to the home page.
1. *Medicaid Volume* section.
    a. **Eligibility Completion status** icon: indicates whether your eligibility information is complete or if there is still some missing information on the page.
    a. **Enter Start Date for 90-Day Representative Period** text field: enter the date of the first day of your representative period. The system will automatically display the end date.



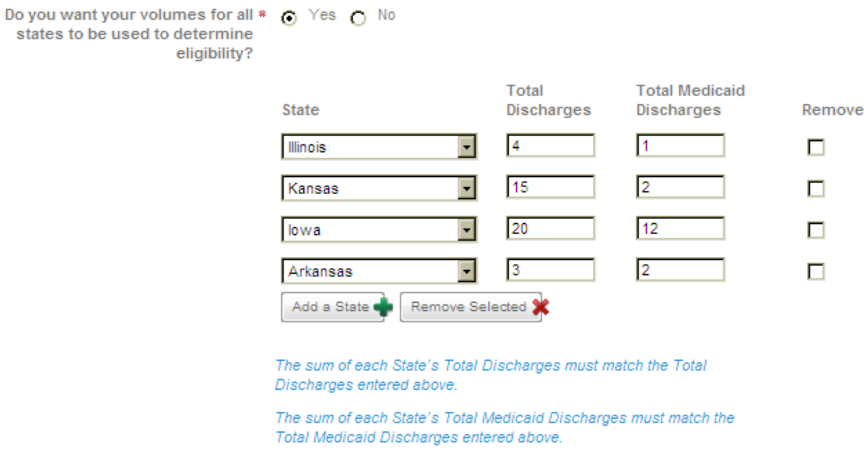
    b. Calendar icon: opens a Calendar Utility from which you can click on a date to select it.
    c. **End Date** display field: the end date of the 90-day representative period based on the start date you entered.
    d. **Total Discharges for Representative Period** field: enter your total Discharges for the representative period you noted above.

e. **Medicaid Discharges for Representative Period** field: enter your Medicaid Discharges for the representative period you noted above.

b. **Do you practice in more than one state?** radio buttons: identify whether or not you practice in more than one state.

   i. When you select the **Yes** radio button, you must answer the question “Do you want your volumes for all states to be used to determine eligibility?”

   ii. If the answer to this question is also **Yes**, a table will appear allowing you to enter encounters per state.



f. **Do you want your volumes for all states to be used to determine eligibility?** radio buttons: identify whether or not you want to use the other states’ volumes to determine your eligibility. If you chose the **Yes** radio button, the following fields are displayed for each state.

   1. **State** pull-down column: select a State to enter the encounter information for that State.
   2. **Total Encounters** column: enter the encounters for the State and selected time period.
   3. **Total Medicaid** Encounters
   4. **Remove** column: select a checkbox in this column and click the **Remove Selected** button. This will remove the row.

   Select the **Add a State** button to add another row to the table.

g. **Average Length of Stay for hospital cost report year that ends during the prior {federal fiscal year}** field: the Average Length of Stay for hospital cost report year.

h. **Medicaid Volume** section: this formula uses the Total Discharges and Medicaid Discharges to calculate your result.

   i. **Calculate** button: calculates the results of Medicaid Volume. The calculated results will be displayed.

   ii. **Display field.** This is where the calculated result is displayed

l. **Meets Medicaid Eligibility Requirements** message: indicates if you have met the requirements for eligibility.

   i. “Yes” will display if your hospital meets the following criteria:

      - Your hospital is a Children’s Hospital
      - Your hospital’s Medicaid volume is greater than 10% with an average length of stay less than or equal to 25 days and the last four digits of your CCN are between 00001 through 0879 or 1300 through 1399

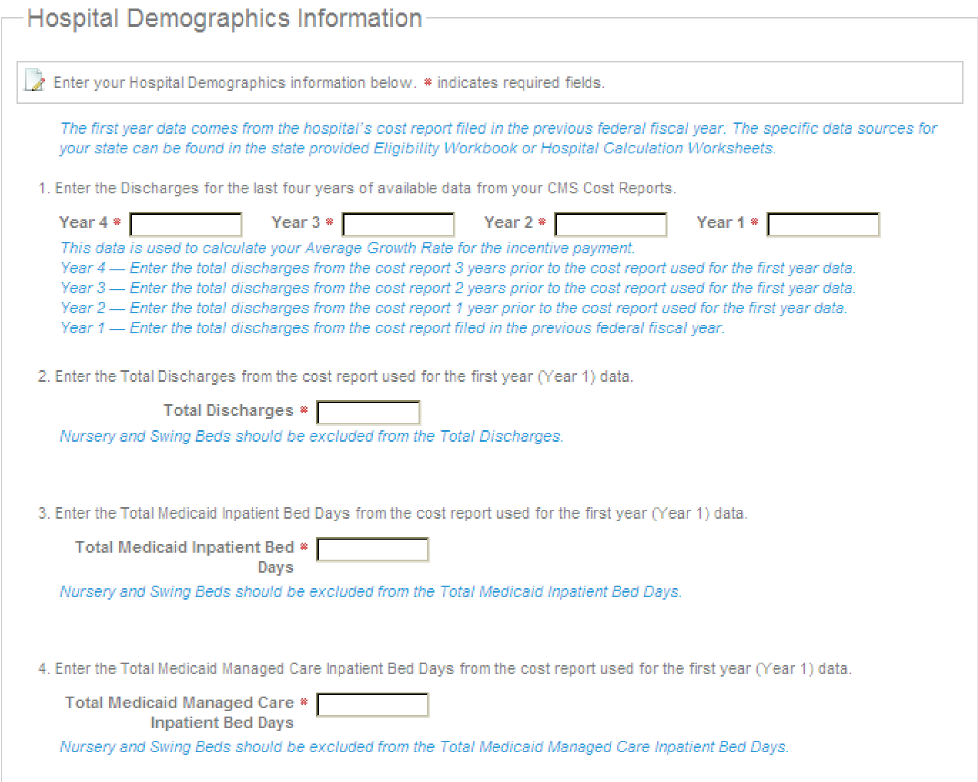
   ii. “No” will display if your hospital does not meet the criteria listed above.

m. “No - you may wish to adjust your representative period.” This message displays when the information entered does not meet the minimum criteria for hospital eligibility.

2. *Hospital Demographics Information* section.

a. *Enter the Discharges for the last four years of available data from your CMS Cost Reports*. Enter discharges for the last four years in the Year 4 through Year 1 fields.

b. Enter the Total Discharges from the cost report year used for the first year (Year 1) data.



Hospital Demographics Information

Enter your Hospital Demographics information below. * indicates required fields.

The first year data comes from the hospital’s cost report filed in the previous federal fiscal year. The specific data sources for your state can be found in the state provided Eligibility Workbook or Hospital Calculation Worksheets.

1. Enter the Discharges for the last four years of available data from your CMS Cost Reports.

Year 4 * Year 3 * Year 2 * Year 1 *

This data is used to calculate your Average Growth Rate for the incentive payment.
Year 4 — Enter the total discharges from the cost report 3 years prior to the cost report used for the first year data.
Year 3 — Enter the total discharges from the cost report 2 years prior to the cost report used for the first year data.
Year 2 — Enter the total discharges from the cost report 1 year prior to the cost report used for the first year data.
Year 1 — Enter the total discharges from the cost report filed in the previous federal fiscal year.

2. Enter the Total Discharges from the cost report used for the first year (Year 1) data.

Total Discharges *

Nursery and Swing Beds should be excluded from the Total Discharges.

3. Enter the Total Medicaid Inpatient Bed Days from the cost report used for the first year (Year 1) data.

Total Medicaid Inpatient Bed Days *

Nursery and Swing Beds should be excluded from the Total Medicaid Inpatient Bed Days.

4. Enter the Total Medicaid Managed Care Inpatient Bed Days from the cost report used for the first year (Year 1) data.

Total Medicaid Managed Care Inpatient Bed Days *

Nursery and Swing Beds should be excluded from the Total Medicaid Managed Care Inpatient Bed Days.

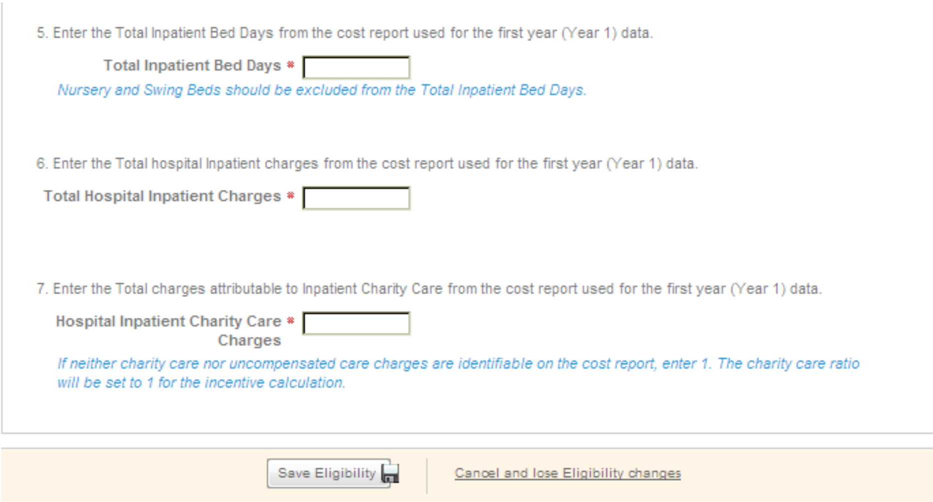
c. *Enter the Total Medicaid Inpatient Bed Days from the cost report used for the first year (Year 1) data.*

d. *Enter the Total Medicaid Managed Care Inpatient Days from the cost report used for the first year (Year 1) data.*

e. *Enter the Total Inpatient Bed Days from the cost report used for the first year (Year 1) data*.

f. *Enter the Total Hospital Inpatient Charges from the cost report used for the first year (Year 1) data*.

g. *Enter the Total Charges attributable to Inpatient Charity Care for from the cost report used for the first year (Year 1) data*.



3. **Save Eligibility** button: saves the information you have just entered. If you have left required field blank or entered information incorrectly, you will receive an error message.

4. **Cancel and lose Eligibility changes** link: clears the page of any information you have just entered.

3.5.5 Step 3: Attestation of EHR Details

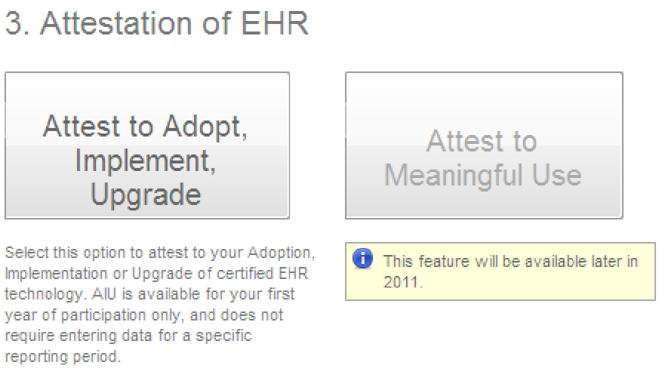
Clicking the **Attestation of EHR** link on the EH home page directs you to the *3. Attestation of EHR* page where you can choose your attestation type. Once you have selected your attestation type, you will then be able to upload documents related to your EHR software and enter its certification number.

3.5.5.1 **3: Attestation of EHR.** The first step of completing this section is to choose the type of attestation. You will be able to access this section once you complete the *About You* and *Confirm Medicaid Eligibility* pages. This page includes two tabs: the **Criteria** tab and the **Certified EHR Technology** tab.

The *Attestation of EHR* page displays the following:

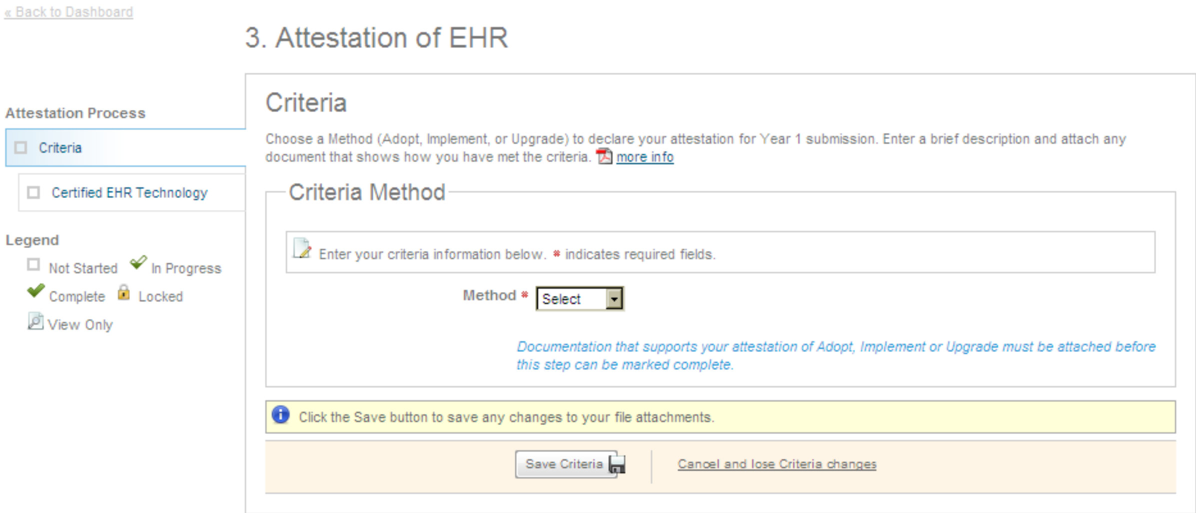
1. **< Back to Dashboard** link: returns you to the home page.

2. **Attest to Adopt, Implement, Upgrade** link: opens the AIU workflow. This option is only available your first year of participating. The next section describes what happens when you click the **Attest to Adopt, Implement, Upgrade** (AIU) box.
3. **Attest to Meaningful Use** link: opens the MU workflow. (This option is not currently available.)



3.5.5.2 The *3: Attestation of EHR - Criteria* page allows you to choose the method of your AIU attestation, and provide any supporting details for that choice. This page has two sub pages, accessible by tabs on the left hand side of the page.

1. **Criteria** tab: opens the *Criteria* section within the *Attestation of EHR* page. When you are on this page, the tab becomes highlighted. This tab is visible on all pages within the *AIU Attestation of EHR* section.
2. **Certified EHR Technology** tab: opens the *Certified EHR Technology* section within the *AIU Attestation of EHR* section.



The *Criteria* page displays the following:

3. **< Back to Dashboard** link: Clicking this link will return you to the home page.
4. *Legend* section: defines the completion status icons used in this section and is visible on all pages within the *AIU Attestation of EHR* workflow.
5. *Criteria Method* section.

a. Criteria Completion Status icon: indicates if your criteria information is complete or there is still some missing information on this page.

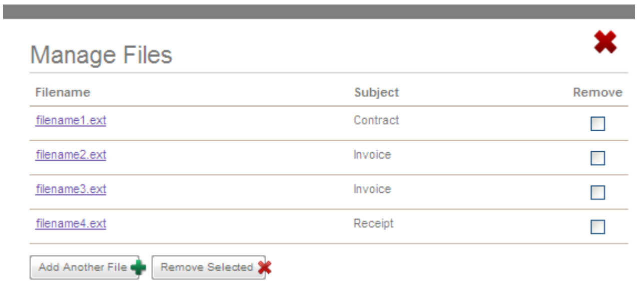
b. **Method** pull-down menu: selecting **Adopt** as your attestation type displays the following:

   i. **More info** link: opens a pop-up window explaining the type of documentation that needs to be attached for the selected attestation method.

   ii. **Please describe briefly how you meet…** text area: allows you to describe how you meet the criteria for adoption of EHR technology.

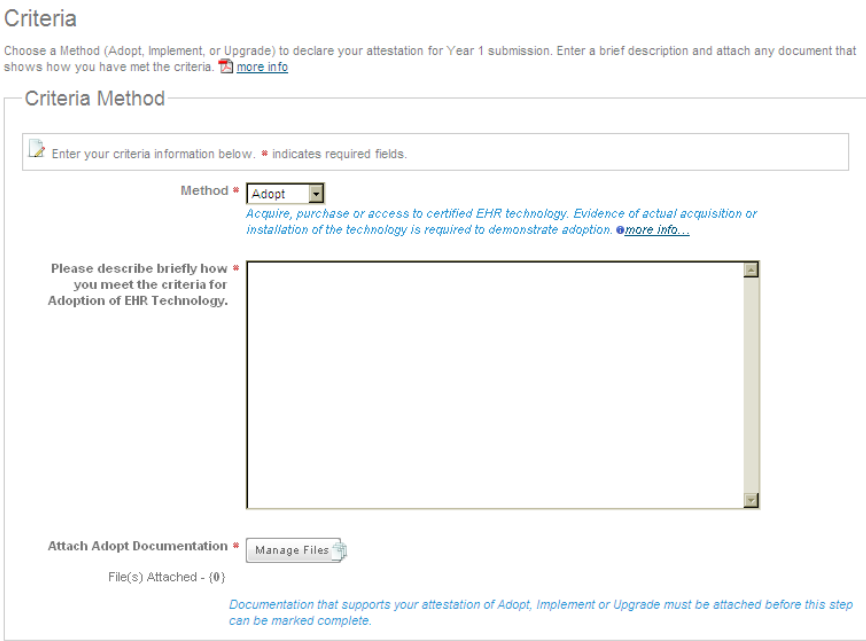
   iii. *Attach Adopt Documentation* section: allows you to attach documents.

   iv. **Manage Files** button: displays a pop-up window where you can view, attach, and remove files. The file you attach must be 10MB or smaller. You can attach these types of files: Adobe PDF, GIF, JPEG, BMP and PNG. See Section 3.9 for details about the *Manage Files* component.



Each time you select **Manage Files** on this page, all of the files you attached and previously saved will display with the file name and subject visible. You have the ability to remove files until you submit your final attestation.

Note: for Adoption Attestation, a Contract is required. An Invoice, Receipt, or Vendor Letter can also be added.



c. **Method** pull-down menu: selecting **Implement** as your attestation type displays the following:

   i. **More info** link: opens a pop-up window explaining the type of documentation that needs to be attached for the selected attestation method.

   ii. **Please describe briefly how you meet…** text area: allows you to describe how you meet the criteria for implementation of EHR technology.

   iii. *Attach Adopt Documentation* section: allows you to attach documents.

   iv. **Manage Files** button: displays a pop-up window where you can view, attach, and remove files. The file you attach must be 10MB or smaller. You can attach these types of files: Adobe PDF, GIF, JPEG, BMP and PNG. See Section 3.9 for details about the *Manage Files* component.

   Each time you select **Manage Files** on this page, all of the files you are attaching and previously saved will display with the file name and subject visible. You have the ability to remove files until you submit your final attestation.

   Note: for Implementation Attestation, a contract is required. An Invoice, Receipt, or Vendor Letter can also be added.

d. **Method** pull-down menu: selecting **Upgrade** as your attestation type displays the following:

   i. **More info** link: opens a pop-up window explaining the type of documentation that needs to be attached for the selected attestation method.

ii. **Please describe briefly how you meet…** text area: allow you to describe how you meet the criteria for upgrade of EHR technology.

iii. *Attach Adopt Documentation* section: allows you to attach documents.

iv. **Manage Files** button: displays a pop-up window where you can view, attach, and remove files. The file you attach must be 10MB or smaller. You can attach these types of files: Adobe PDF, GIF, JPEG, BMP and PNG. See Section 3.9 for details about the *Manage Files* component.

Each time you select **Manage Files** on this page, all of the files you are attaching and previously saved will display with the file name and subject visible. You have the ability to remove files up until you submit your final attestation.

Note: for Upgrade Attestation, two documents are required: both a Contract and a Vendor Letter. An Invoice or a Receipt can also be added.

6. **Save Criteria** button: saves the information you have just entered and the documents you have attached on this page. If you have left a required field blank or entered information incorrectly, you will receive an error message.

7. **Cancel and lose Criteria changes** link: clears the page of any information you have just entered.

Once you have successfully saved the information on this page, select the **Certified EHR Technology** tab.

3.5.5.3 The *Certified EHR Technology* page allows you to enter your EHR certification number**.**

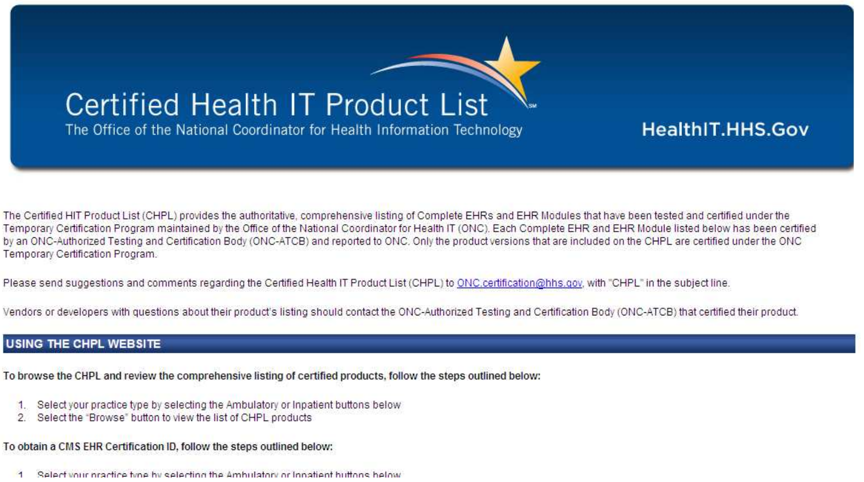
1. **< Back to Dashboard** link: returns you to the home page.

2. The *Your Understanding* section contains an icon indicating whether your Certified EHR Technology information is complete or if there is still some missing information on this page.

   a. Clicking the **Understanding** checkbox signifies that you agree with the statement of understanding next to the checkbox. When you check this box, additional fields display. If you do not check this box, the system will not allow you to continue.

   b. “I understand that it is my responsibility, as the Provider, to ensure…” This is a statement of understanding as to your responsibility to demonstrate that your EHR technology is certified through the ONC. When you check the box before this statement, you will be required to complete the other fields on the page. If you do not check the box before this statement, the system will not allow you to continue.

      i. **ONC public web service** link: opens the ONC website.



3. The *Your EHR Certification Information* section.

    a. **CMS EHR Certification ID** text field: enter the ONC certification number of your EHR software.

    b. **Validate** button: when this is selected, the application will search the ONC database for the EHR certification number you entered above. If the number you entered is found on the ONC database, the MO-SLR automatically populates the following information associated with that number:

        - **EHR Vendor** display field.
        - **EHR Name Orientation** display field.
        - **EHR Version Number** display field.

        If the number you entered is not found, an error message is displayed.

    c. The *Supporting Documentation* section allows you to attach documentation associated with your EHR certification.

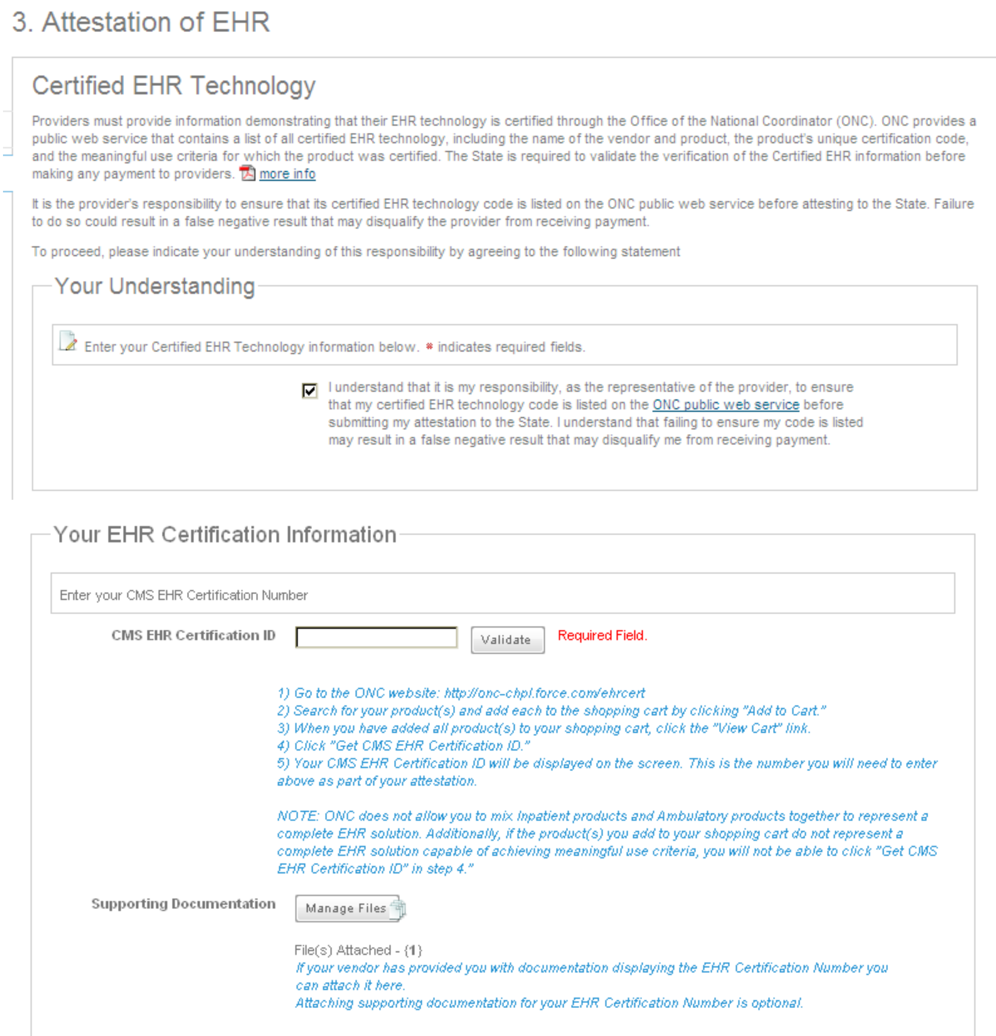
    d. **Manage Files** button: displays a pop-up window where you can view, attach and remove files. The file you attach must be 10MB or smaller. You can attach these types of files: Adobe PDF, GIF, JPEG, BMP, and PNG.

        Each time you select **Manage Files** on this page, all of the files you are attaching and previously saved will display with the file name and subject visible. You have the ability to remove files up until you submit your final attestation.

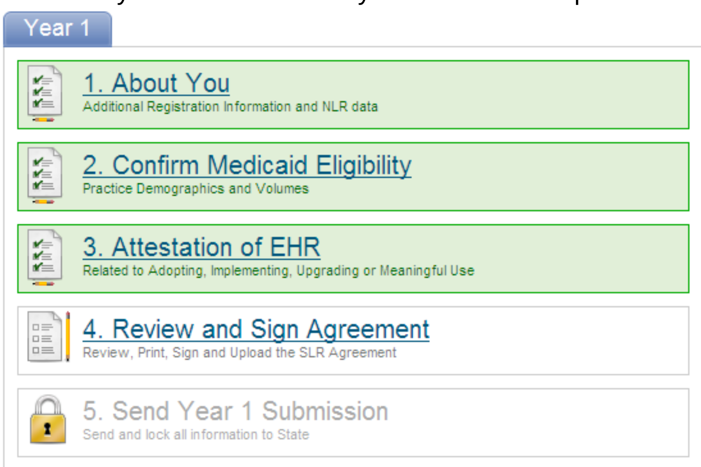
    f. **File(s) Attached – {X}** display field: indicates the number of files currently attached for this specific page. Up to 10 files of up to 10 MB apiece can be added to the *Manage Files* component of each section.

4. **Save Certified EHR Technology** button: saves the information you have just entered on the page. If you have left a required field blank or entered information incorrectly, you will receive an error message.

5. **Cancel and lose Certified EHR Technology changes** link: clears the page of any information you have just entered.



Once you have successfully saved the information on all pages within the AIU Attestation of EHR, the status icon on your home page will change to indicate that your Attestation of EHR section is complete. The system will now allow you move onto Step 4.



3.5.6 Step 4: Review and Sign Attestation Details

Clicking the **Review and Sign Attestation** link on the EH homepage directs you to *the 4. Review and Sign Attestation* page. This is where you will review the attestation agreement. Once you have had a chance to review it, you must print it out in order to sign it. Once signed, the agreement must be scanned and then uploaded into the MO-SLR.

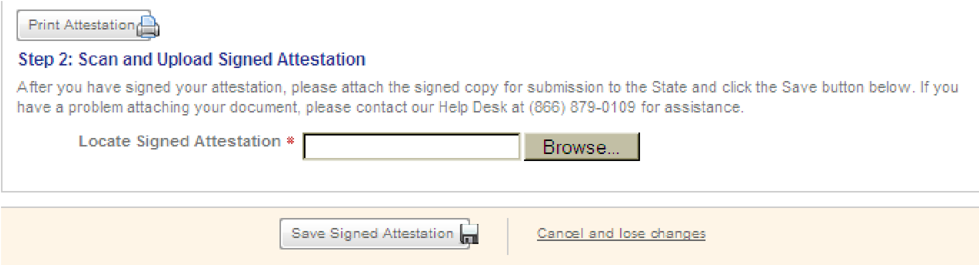
The *Review and Sign Attestation* page displays the following:

1. **< Back to Dashboard** link: returns you to the home page.
2. The *Review and Sign Attestation Completion Status* section indicates whether your Review and Sign Attestation information is complete or if there remains missing information on this page.
3. The *Step 1: Print to Sign Attestation* section contains the **Print Attestation** button. When selected, this will print a copy of the Attestation Agreement.

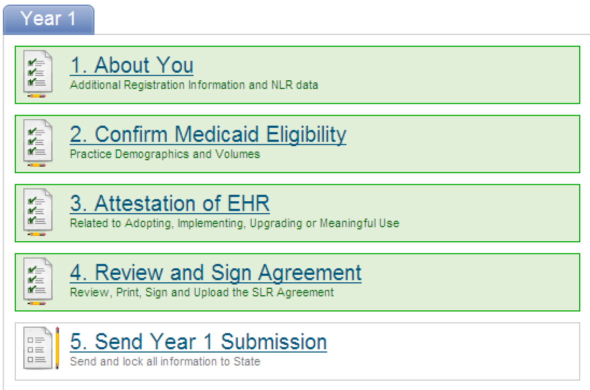
   The *Step 2: Scan and Attach Signed Attestation* section contains a **Manage Files** button, which will allow you to upload the Attestation Agreement. See Section 3.9 for details about the *Manage Files* component. You have the ability to remove files up until you submit your final attestation.

4. The **File(s) Attached – {X}** message indicates the number of files currently attached for this specific page.
5. **Save Signed Attestation** button: saves the information you have entered on this page. If you have left a required field blank or entered information incorrectly, you will receive an error message. This will change to a **Remove File** button once a file is attached.

6. **Cancel and lose changes** link: clears the page of any information you have just entered.



Once you have successfully saved the signed attestation, the status icon on your home page will change to indicate that Step 4 is complete. The system will now let you move onto Step 5.

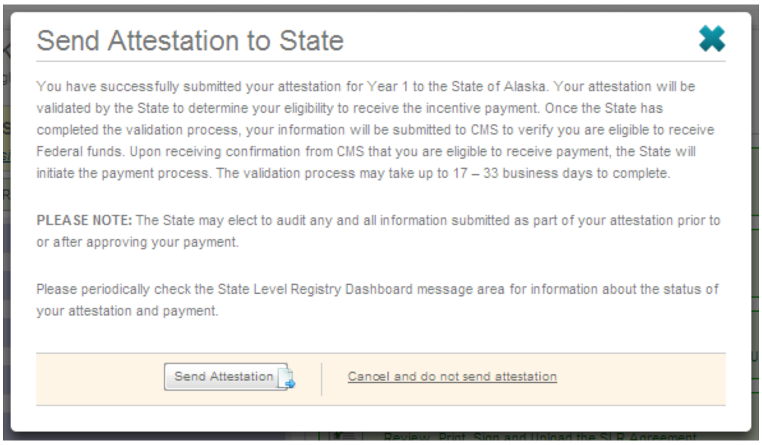


3.5.7 Step 5: Send Year X Attestation Details

Clicking the **Send Year X Attestation** link opens a pop-up window slowing you to send your attestation to the State.

The *Send Attestation to State* window displays the following:

1. **Send Attestation** button: submits you attestation application to the State. All steps in the workflow section of your home page will be locked down. You will not be able to make any more changes to the section, but can still view the information you entered on a report.
2. **Cancel and do no send Attestation** link: returns you to the home page.



3.6 Accessing Reports

3.6.1 Reports for Eligible Hospitals

Located to the left of the page, the *Reports* section displays the following items:

1. Reports message: the following message appears if you don't have any data in the system to run a report: "Reports will be available once your information is saved."
2. **Provider MO-SLR Application Information** link: some information has been saved to the MO-SLR web application, this link appears. Clicking this link opens a pop-up window with the Provider MO-SLR Application Information report results. This report prints all of the Attestation information that you have already entered.

   The Provider MO-SLR Application report displays the following:

   a. *User Account Information* section: displays the information you entered when you created your MO-SLR account.

   b. *Registration Information* section: displays the information saved when you completed the *About You* section.

   c. *NLR Data* section: displays your NLR data that the MO-SLR has received.

   d. *Medicaid Eligibility Information* section: displays the information saved when you completed the *Confirm Medicaid Eligibility* section.

   e. *Attestation of EHR Information* section: This area displays the information saved when you completed the *Attestation of EHR* section.

   f. *Payments* section: This area displays the information related to any payments you have received.

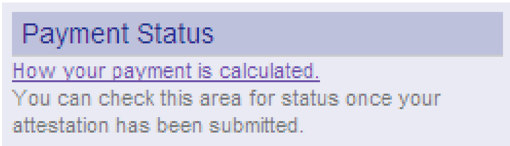
   You can print this report after you have saved any of your information in the MO-SLR Web application. If you print the report before all of the areas have been completed, only those sections with saved information will print on the report. You can also filter the report by year.

3.7 View Payment Status/Payment Calculations

3.7.1 Payment Status and Calculations for Eligible Hospitals

Located to the left of the page, the *Payment Status* section displays the following items that are visible on the home page:

1. Payment Status message. This is where you can check on the status of your payment.



2. **How your payment is calculated** link: opens a pop-up window that explains in detail how your payment is going to be calculated.
    a. **< Back to Dashboard** link: returns you to the home page.
    b. *How Your Payment is Calculated* page.
    c. **"States may pay hospitals up to 100 percent…"** a detailed explanation as to how your payment will be paid.
    d. *Initial Amount* section.
        i. **Discharges** row: displays the discharge information you entered in the *Confirm Medicaid Eligibility* page, for Years 1 through 4.
        ii. **Growth rate** row: displays the rates of growth for the three years entered on the *Confirm Medicaid Eligibility* page.
            1. Year 2 Growth Rate: (Year 2 – Year 1) / Year 2
            2. Year 3 Growth Rate: (Year 3 – Year 2) / Year 3
            3. Year 4 Growth Rate. (Year 4 – Year 3) / Year 4
            4. Average Annual Growth Rate: the average growth rate for years two, three and four, which is Year 2 Growth Rate + Year 3 Growth Rate + Year 4 Growth Rate / 3
        iii. **Total Discharges** row: This displays the discharge information you entered in the Confirm Medicaid Eligibility page.
            1. **Help Text:** Total prior fiscal year discharges.
    e. Second *Initial Amount* section.

    In this section of the page, a chart is displayed organizing the information into five columns. The first column displays the metric; the second column represents the information entered for year 1; the third column represents the information entered for year 2, the fourth column represents the information entered for year 3; the fifth column represents the information entered for year 4.

        i. **Annual discharges w/growth factor** row: displays the discharges with growth factors applied to Year 2 through 4.

1. Year 1: total discharges up to 23,000.
2. Year 2: Year 1 amount plus the average annual growth rate (+1%) up to 23,000.
3. Year 3: Year 2 amount plus the average annual growth rate (+1%) up to 23,000.
4. Year 4: Year 3 amount plus the average annual growth rate (+1%) up to 23,000.

ii. **Disallowed discharges** row: displays the discharges that are not allowed as part of the calculation.

1. Metric: the per discharge amount is calculated based on the 1150th – 23,000th discharge.
2. Year 1: the disallowed discharges for year 1.
3. Year 2: the disallowed discharges for year 2.
4. Year 3: the disallowed discharges for year 3.
5. Year 4: the disallowed discharges for year 4.

iii. **Allowable discharges** row: displays discharges that are allowed as part of the calculation.

1. Metric: Year {X} Annual Discharges with growth factor – 1149, with a maximum of 23,000 allowable.
2. Year 1: the allowed discharges for year 1.
3. Year 2: the allowed discharges for year 2.
4. Year 3: the allowed discharges for year 3.
5. Year 4: the allowed discharges for year 4.

iv. **Per Discharge Amount** row: displays the amounts per discharge, currently $200 for all hospitals.

1. Metric: the per discharge amount is $200 for all hospitals.
2. Year 1: $200.
3. Year 2: $200.
4. Year 3: $200.
5. Year 4: $200.

v. **Discharge Related Amount** row: displays the amounts calculated on the allowable discharges.

1. Metric: Year {X} Allowable Discharges X Per Discharge, which is $200.
2. Year 1: the sum of allowed discharges for year 1 multiplied by $200.
3. Year 2: the sum of allowed discharges for year 2 multiplied by $200.

4. Year 3: the sum of allowed discharges for year 3 multiplied by $200.
5. Year 4: the sum of allowed discharges for year 4 multiplied by $200.

vi. **Base Amount** row: displays the base amount for all hospitals, which is $2,000,000.

1. Metric: the base amount is $2,000,000 for all hospitals.
2. Year 1: $2,000,000.
3. Year 2: $2,000,000.
4. Year 3: $2,000,000.
5. Year 4: $2,000,000.

vii. **Gross Amount** row: displays the sum of the base amount for all hospitals plus the discharge related amount.

1. Metric: Year {X} Discharge Related Amount plus Base Amount of $2,000,000.
2. Year 1: the gross amount for year 1.
3. Year 2: the gross amount for year 2.
4. Year 3: the gross amount for year 3.
5. Year 4: the gross amount for year 4.

viii. **Transition Factor** row: displays the transition factor applied for each year.

1. Metric: the transition factor is reduced each year.
2. Year 1: Displays the transition factor of 1.
3. Year 2: Displays the transition factor of 0.75.
4. Year 3: Displays the transition factor of 0.50.
5. Year 4: Displays the transition factor of 0.25.

ix. **Annual EHR Amount** row: displays the sum of the year’s gross amount multiplied by the transition factor.

1. Metric: Year {X} Gross Amount X Transition Factor
2. Year 1: the annual EHR amount for year 1.
3. Year 2: the annual EHR amount for year 2.
4. Year 3: the annual EHR amount for year 3.
5. Year 4: the annual EHR amount for year 4.

x. **Overall EHR Amount** row: displays the sum your EHR amounts for all four years.

f. **Medicaid Share** section.

i. **Medicaid Inpatient Bed Days** field: displays the Medicaid inpatient bed days that entered on the *Confirm Eligibility* page.

ii. **Medicaid Managed Care Inpatient Bed Days** field: displays the Medicaid Managed Care inpatient bed days that entered on the *Confirm Eligibility* page.

iii. **Numerator** field: displays the sum of the two previous fields: *Medicaid Inpatient Bed Days + Medicaid Managed Care Inpatient Days.*

iv. **Total Inpatient Bed Days** field: displays the inpatient bed days that you entered on the *Confirm Eligibility* page.

v. **Total Charges** field: displays the total charges you entered on the Confirm Eligibility page.

vi. **Total Charity Care Charges** field: displays the total charges that you attributed to charity care on the *Confirm Eligibility* page.

1. **Denominator** field: displays the results of *Total Inpatient Bed Days x ((Total Charges - Total Charity Care Charges) / Total Charges.*

vii. **Medicaid Share** field: displays the results of *(Medicaid Inpatient Bed Days + Medicaid Managed Care Inpatient Bed Days) / (Total Inpatient Bed Days x ((Total Charges - Total Charity Care Charges) / Total Charges))*

g. *Aggregate EHR Amount* section.

i. The Aggregate EHR amount is the Overall EHR Amount x Medicaid Share

How Your Payment is Calculated

States may pay hospitals up to 100 percent of an aggregate EHR hospital incentive amount provided over a minimum of a three-year period and a maximum of a six-year period. The aggregate EHR incentive amount is the total amount the hospital could receive in {Medicaid} payments over a theoretical four years of the program. It is the product of two factors:

1. The overall EHR amount and
2. The Medicaid Share

Initial Amount

	Year 1	Year 2		Year 3		Year 4		Average Annual Growth Rate
Discharges	999,999	999,999		999,999		999,999		
Growth Rate			99.999999		99.999999		99.999999	99.999999
Total Discharges	999,999							

Initial Amount

	Year 1	Year 2	Year 3	Year 4
Annual discharges w/ growth factor	999,999	999,999	999,999	999,999
Disallowed Discharges	9,999	9,999	9,999	9,999
Allowable Discharges	999,999	999,999	999,999	999,999
Per Discharge Amount	$999	$999	$999	$999
Discharge Related Amount	$99,999,999	$99,999,999	$99,999,999	$99,999,999
Base Amount	$9,999,999	$9,999,999	$9,999,999	$9,999,999
Gross Amount	$999,999,999	$999,999,999	$999,999,999	$999,999,999
Transition Factor	.99	.99	.99	.99
Annual EHR Amount	$999,999,999	$999,999,999	$999,999,999	$999,999,999
Overall EHR Amount	$999,999,999			

{Medicaid} Share

{Medicaid} Inpatient Bed Days	999,999
{Medicaid} Managed Care Inpatient Bed Days	999,999
Numerator	999,999
Total Inpatient Bed Days	999,999
Total Charges	999,999
Total Charity Care Charges	999,999
Denominator	999,999
{Medicaid} Share	99.99

Aggregate EHR Amount

This is the total amount of incentive you may receive over the life of the program.

Aggregate EHR Amount: $999,999,999.99

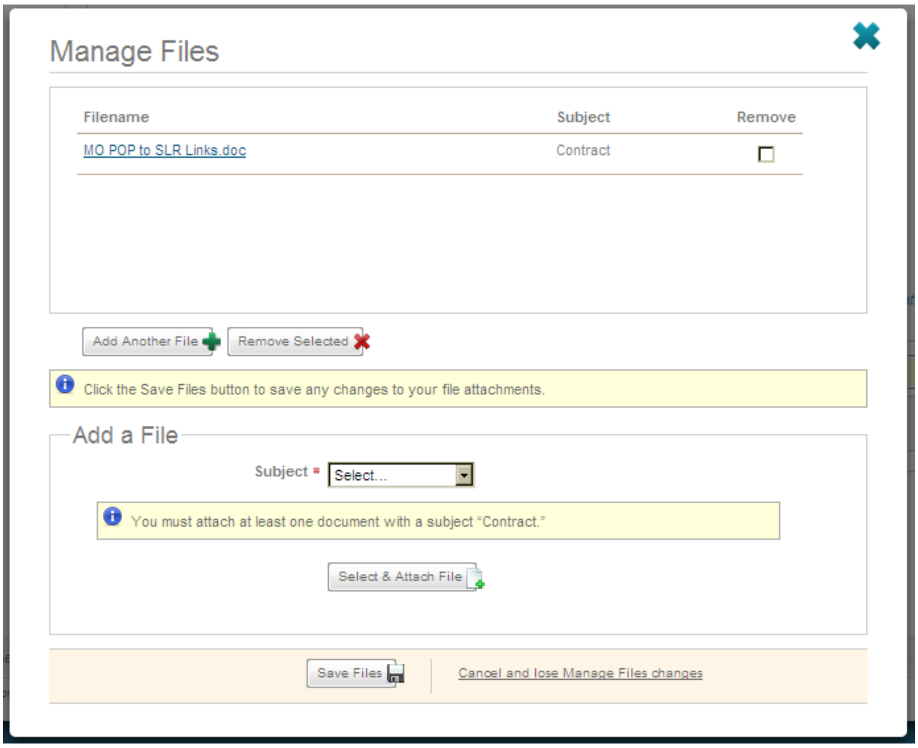
3.8 Managing Files

3.8.1 The Manage Files Section

Manage Files buttons are available in several sections of the SLR and open a component that allows you to associate documents with that section.

1. Close icon: clicking the red X in the upper right-hand corner closes the *Manage Files* window and returns you to the previous page.
2. **Filename** column: the name of the uploaded file. You can select the filename link and it will display the file for viewing.
3. **Subject** column: the subject of the uploaded file.

4. **Remove** column: clicking a checkbox in this column allows you to delete one or more files at one time.
5. **Add Another File** button: opens a window containing the following the fields, allowing you to add another document.
   i. **Subject** text field: identify what type of document you are attaching.
   ii. **File** text field: the file name will display once it is selected.
   iii. **Browse** button: allows you to select the file you would like to attach.
   iv. **Attach File** button: adds the document that you selected.
6. **Remove Selected** button: removes any file(s) from the table for which you have clicked their associated **Remove** checkbox.
7. **File(s) Attached – {X}** message allows you to know the number of files currently attached for this specific page.
8. Up to 10 files of up to 10 MB apiece can be added to the *Manage Files* component of each section.



4. Troubleshooting

4.1 Accessing Help

For general Help, all MO-SLR web pages have a **Help** Link that opens up a copy of this User Manual. For MO-SLR Web application assistance, you can contact the ACS Help Desk designated to support the MO-SLR.

Phone: (866) 879-0109
Email: SLRHelpdesk@acs-inc.com

4.1.1 Help Text Displays

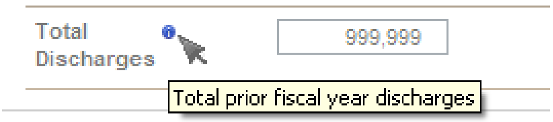
Located throughout the MO-SLR Web application, there are various tool tips, help text and **more info** link displayed to help you complete the pages.

Here are a few examples:

Tool Tips. A tool tip is text that displays when you hover your mouse over an area on the page.

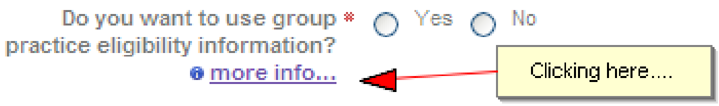
Normal page view:

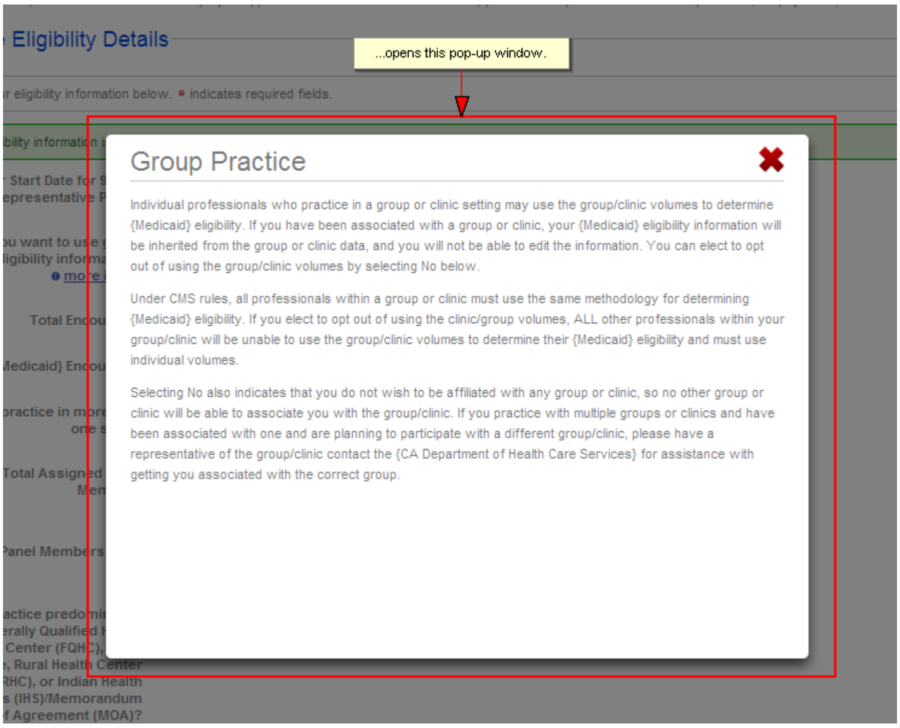
Page view with tool tip:



Help Text. Help text is text that displays on the page. Help text instructs you on how to respond to a particular field or, it provides some additional information about the field or the page. For example:

more info… links: open a resource to provide more details about the field or page that you are completing. For example:





4.2 Web Page Message Display

When you receive an error message, here's how to resolve them:

What is the error message?	On what page(s) could this error appear?	How can you fix it?
Your login attempt was not successful. Please try again.	• Login	Re-enter your Login ID and password. You have four total attempts to enter the correct information.
Your account is currently locked out; please contact your site administrator or Help Desk at 866-879-0109.	• Login	Contact the site administrator or Help Desk to get your account unlocked.
Please select the agreement checkbox to continue.	• EULA	Click the checkbox.
The User ID entered is not recognized in the system. Please try again.	• Forgot Password	Re-enter your User ID. You have four total attempts to enter the correct information.
Your attempt to retrieve your User ID was not successful. Please contact the Help Desk at 866-879-0109.	• Forgot Password	Contact the site administrator or Help Desk

Your answer could not be verified. Please try again.	• Forgot Password	Re-enter your answer to the Challenge Question. You have four total attempts to enter the correct information.
Your attempt to retrieve your password was not successful. Please contact the Help Desk at 866-879-0109.	• Forgot Password	Contact the site administrator or Help Desk.
Password must have a minimum of 8 characters and a maximum of 20. Your password must include at least 1 upper case and 1 lower case letter, 1 number, 1 special character (the "at" symbol "@"; pound "#"; exclamation "!"); not your login name, not an old password.	• Reset Password • Create Login • My Account • Create Account	Re-enter your password. You have four total attempts to enter the correct information.
The Confirm New Password must match the New Password entry.	• Reset Password • Create Login • My Account • Create Account	Re-enter the new password.
NPI is 10 digits.	• Forgot User ID • Create Account	Re-enter your 10 digit NPI.
TIN is 9 digits.	• Forgot User ID • Create Account	Re-enter your 9 digit TIN.
IDs entered are not in our system. If you need assistance, please contact the Help Desk at 866-879-0109.	• Forgot User ID	Re-enter any numbers that are incorrect.
The TIN and ID entered does not match a provider on file. Please contact the help desk at 866-879-0109 for assistance.	• Create Account	Contact the Help Desk.
The characters you entered didn't match the image verification. Please try again.	• Create Account	Re-enter the CAPTCHA image.
The User ID must be between 8 – 10 characters. No spaces or special characters are allowed. Please try again.	• Create Login • Create Account	Enter a User ID that is between 8 to 10 characters without spaces or special characters.
User ID is not available. Please try again.	• Create Login • Create Account	Enter a new User ID.
Please enter a valid Email address.	• Create Login • My Account • Create Account • About You for EH • About Your Group	Re-enter your email address.

	•	.
License number is 9 digits.	• About You for EH	Re-enter your 9 digit license number.
To proceed, please select the checkbox to agree with the statement. Providers that do not meet these minimum criteria are not eligible to participate in the program.	• About You for EH	Click the checkbox.
Representative Period must be in the cost report year ending prior to the start of the current federal fiscal year.	• Confirm Medicaid Eligibility for EH	Re-enter dates in the representative cost report year.
You have entered the same state twice. Please remove the state or change it to a unique state for indicating patient volumes. Duplicate states are not allowed.	• Confirm Medicaid Eligibility for EH	Review the states you have entered and remove duplicates or change the entry to a unique state.
Numerical data must be entered in the Total Discharges for Representative Period and Medicaid Discharges for Representative Period fields for the calculation to be run.	• Confirm Medicaid Eligibility for EH	Re-enter the appropriate data in the required fields.
Please attach your supporting document.	• Review, Sign, and Attach Attestation for EH	Attach a document.
Your Certification Number is not found.	• Attestation of EHR – Certified EHR Technology for EH	Re-enter the certification number of your EHR.
Attestation of EHR – Criteria for EH	• A brief description of how you meet the selected Criteria is required to continue.	Enter a brief description of how you meet the selected criteria.

4.3 Frequently Asked Questions (FAQs)

Clicking on the highlighted section links following the questions below will direct you to that section within the User Manual.

How do I report a problem with the MO-SLR application? Section 1.4 – Problem Reporting or Section 4.1 – Accessing Help

Why was the MO-SLR Web application developed? Section 2 - Overview

What can I do with the MO-SLR Web application? Section 2.1 – Application Features

What do I need in order to be able to use the MO-SLR Web application? Section 2.3 – Materials and Preparation

What does CMS consider an Eligible Hospital? Section 5 - Definition of Eligible Hospital

How do I log into the MO-SLR Web application? Section 3.1 – Login – Accessing the MO-SLR

I represent an Eligible Hospital. How do I create an MO-SLR account for the hospital? Section 3.2 – Creating a New MO-SLR Account for Hospital Administrators

How do I change my password? Section 3.4 – How to Change Your Password

How do I get started in applying for the incentive payment?

- **I represent an Eligible Hospital.** Section 3.5 – Applying for the incentive as an Eligible Hospital (EH)

How do I access my messages?

- **Accessing messages for Eligible Hospitals.** Section 3.6.1 – Messages for EHs

How do I access reports? Section 3.7 – Accessing Reports

Where can I view the status of my payment?

- **I represent an Eligible Hospital.** Section 3.8.1 – Payment Status and Calculations for Eligible Hospital (EH)

How is my payment calculated?

- **I represent an Eligible Hospital.** Section 3.8.2.b – How your Payment is Calculated.

5. Definitions

This section lists any glossary terms specifically applicable to this document.

Term/Acronym	Explanation/Expansion
American Reinvestment and Recovery Act of 2009 (ARRA)	The American Reinvestment and Recovery Act of 2009 is an economic stimulus package enacted by the 111th United States Congress in February 2009[1]. Part of the act included money for health information technology (HIT) investments and payments.
CMS Certification Number (CCN)	A number assigned to hospitals by the Centers of Medicare and Medicaid Services, the CMS Certification Number (CCN) is the hospital's identification number that is link to its Medicare provider agreement. The CCN is used for CMS certification and also for submitted and reviewing the hospital's cost reports.[2]
Centers for Medicare and Medicaid Services (CMS)	The Centers for Medicare and Medicaid Services (CMS) is a United States Federal Agency which administers Medicare, Medicaid, and the Children's Health Insurance Program (CHIP).[3]
Computerized Physician Order Entry (CPOE)	Computerized Physician Order Entry (CPOE) refers to any system in which clinicians directly enter medication orders and/or tests and procedures into a computer system, which then transmits the order directly to the pharmacy.[4]
EHR Provider Incentive Portal (MO-SLR)	The EHR Provider Incentive Portal (ePIP) is an ACS application created for the capture and maintenance of state mandated information related to the payment of provider incentive payments provided for under the ARRA. For reference, ePIP for Missouri is called the "Missouri State Level Registry (MO-SLR)"
Electronic Health Record (EHR)	An Electronic Health Record (EHR) is an electronic version of a patients medical history, that is maintained by the provider over time, and may include all of the key administrative clinical data relevant to that persons care under a particular provider, including demographics, progress notes, problems, medications, vital signs, past medical history, immunizations, laboratory data and radiology reports.[5]
Electronic Medical Record (EMR)	An electronic medical record (EMR) is a computerized medical record created in an organization that delivers care, such as a hospital and doctor's surgery.[6]

[1] "American Recovery and Reinvestment Act of 2009." *Wikipedia: The Free Encyclopedia* Wikimedia Foundation, Inc. Last modified: November 18, 2010. Date accessed: November 22, 2010.
[2] "Frequently Asked Questions about Accrediting Hospitals in Accordance with their CMS' Certification Number (CCN)." *The Joint Commission*. Article date: July 15, 2010. Date accessed: November 22, 2010.
[3] "Centers for Medicare & Medicaid Services." *CMS: Centers for Medicare & Medicaid services.* United States Department of Health & Human Services. Date accessed: November 22, 2010.
[4] "Computerized Provider Order Entry." *AHRQ: Agency for Healthcare Research and Quality*. United States Department of Health & Human Services. Date accessed: November 22, 2010.
[5] "Electronic Health Records Overview." *CMS: Centers for Medicare & Medicaid services.* United States Department of Health & Human Services. Date accessed: November 22, 2010.
[6] "Electronic medical record." *Wikipedia: The Free Encyclopedia* Wikimedia Foundation, Inc. Last modified: November 5, 2010. Date accessed: November 22, 2010.

Term/Acronym	Explanation/Expansion
Eligible Hospital (EH)	For the purposes of the Medicaid EHR Incentive Program and MO-SLR applications documentation, an eligible hospital (EH) is defined as the following: • Acute care hospitals (including Critical Access Hospitals and cancer hospitals) with at least 10% Medicaid patient volume. • Children's hospitals (no Medicaid patient volume requirements).[7]
Eligible Professional (EP)	For the purposes of the Medicaid EHR Incentive Program and MO-SLR application documentation, an eligible professional (EP) is defined as the following: • Physicians (primarily doctors of medicine and doctors of osteopathy). • Nurse practitioner. • Certified nurse-midwife. • Dentist. • Physician assistant who furnishes services in a Federally Qualified Health Center or Rural Health Clinic that is led by a physician assistant. To qualify for an incentive payment under the Medicaid EHR Incentive Program, an EP must meet one of the following criteria: • Have a minimum 30% Medicaid patient volume*. • Have a minimum 20% Medicaid patient volume, and is a pediatrician*. • Practice predominantly in a Federally Qualified Health Center or Rural Health Center and have a minimum 30% patient volume attributable to needy individuals. *Children's Health Insurance Program (CHIP) patients do not count toward the Medicaid patient volume criteria.[8]
End User License Agreement (EULA)	The End User License Agreement (EULA) details how the software can and cannot be used.[9]
Health Insurance Portability and Accountability Act of 1996 (HIPAA)	The purpose of the Health Insurance Portability and Accountability Act is “to improve…the Medicaid program…and the efficiency and effectiveness of the health care system, by encouraging the development of a health information system through the establishment of standards and requirements for the electronic transmission of certain health information.”[10]
Health Information Technology (HIT)	Health Information Technology (HIT) refers to the use of technology in managing health information. For example, the use of electronic health records instead of paper medical records.

[7] “EHR Incentive Programs: Eligibility – Eligible Hospitals.” *CMS: Centers for Medicare & Medicaid services.* United States Department of Health & Human Services. Date accessed: November 22, 2010.
[8] “EHR Incentive Programs: Eligibility – Eligible Professionals.” *United States Department of Health & Human Services*. Date accessed: November 22, 2010.
[9] “EULA.” *Webopedia*. QuinStreet Inc. Date accessed: November 22, 2010.
[10] “Health Insurance Portability and Accountability Act of 1996.” *CMS: Centers for Medicare & Medicaid services*. Public Law 104-191. 104th Congress. Date accessed: November 22, 2010.

Term/Acronym	Explanation/Expansion
Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH)	The Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH) amends the Public Health Service Act by adding a number of funding opportunities to advance health information technology.[11]
National Level Repository (NLR)	The National Level Repository is a data repository that supports the administration and incentive payment disbursements of Medicare and Medicaid programs to medical professionals, hospitals and other organizations.[12]
National Provider Identifier (NPI)	The National Provider Identifier (NPI) is a Health Insurance Portability and Accountability Act (HIPAA) Administrative Simplification Standard. The NPI is a unique identification number for covered health care providers.[13]
Office of the National Coordinator (ONC) for Health Information Technology	The Office of the National Coordinator for Health Information Technology (ONC) is the principal Federal entity charged with coordination of nationwide efforts to implement and use the most advanced health information technology and the electronic exchange of health information.[14]
Provider	For the purposes of the EHR Provider Incentive Portal (MO-SLR) application documentation, a provider refers to both EPs and EHs.
Taxpayer Identification Number (TIN)	A Taxpayer Identification Number (TIN) is an identification number used by the Internal Revenue Service (IRS) in the administration of tax laws.[15]
Uniform Resource Locator (URL)	In computing, a Uniform Resource Locator (URL) is a Uniform Resource Identifier (URI) that specifies where an identified resource is available and the mechanism for retrieving it.[16]

[11] "HITECH and Funding Opportunities." *The Office of the National Coordinator for Health Information Technology*. United States Department of Health & Human Services. Date accessed: November 22, 2010.
[12] "Grumman nets $34M CMS' data repository project." *CMIO Contracts and Installations*. TriMed Media Group, Inc. Article date: May 17, 2010. Data accessed: November 22, 2010.
[13] "National Provider Identifier Standard (NPI): Overview." *CMS: Centers for Medicare & Medicaid services.* United States Department of Health & Human Services. Date accessed: November 22, 2010.
[14] "The Office of the National Coordinator for Health Information Technology (ONC)." *The Office of the National Coordinator for Health Information Technology*. United States Department of Health & Human Services. Date accessed: November 22, 2010.
[15] "Taxpayer Identification Numbers (TIN)." IRS.gov. Internal Revenue Service. Last modified: August 20, 2010. Date accessed: November 22, 2010.
[16] "Uniform Resource Locator." *Wikipedia: The Free Encyclopedia* Wikimedia Foundation, Inc. Last modified: November 22, 2010. Date accessed: November 22, 2010.